



*The Health
& Health Services of
the City of Cambridge
in
1968*

BEING THE ANNUAL REPORT OF
THE MEDICAL OFFICER OF HEALTH

*including the School Health Service
Chief Public Health Inspector's
and other Reports*

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DEPARTMENT OF PUBLIC HEALTH AND WELFARE
KETT HOUSE

STATION ROAD

CAMBRIDGE

Telephone Cambridge 58977

July 1969

To the Mayor, Aldermen and Councillors of the City of Cambridge

MR MAYOR, LADIES AND GENTLEMEN,

In my last annual report I drew attention to the difficulty of administering the welfare services for the blind and disabled without a senior welfare officer in charge. This state of affairs was remedied during 1968 by the establishment of the post of senior welfare officer which was filled by the appointment of Mr A. L. Wright. The number of speech therapists (which we share with the County Council) was also increased from five to six.

Staff shortages continue to be a problem, particularly in the professional grades, and we have attempted to deal with these in a number of ways. The City Council is sponsoring the training of health visitors and, although their attachment to Cambridge is rather nebulous during their period of training, we have hopes that some of them will come to work here eventually. In any case, the cost involved in sponsoring trainees is fully reimbursed to us by the central government so we do not incur any loss even if we fail to reap any benefit. The Queen's Institute of District Nursing brought to an end its long-established training scheme for district nurses, but several local authorities, including Cambridge City, have joined together to provide a scheme for training their own staff locally and this has proved valuable. Sometimes we can accept a shortage by using less well qualified staff. This does not mean that we give an inferior service but we reserve qualified staff for work which only they can do, leaving other work, which they have traditionally done, to other people. For instance, only part of a health visitors time has, hitherto, been given to the actual health visiting for which she is trained: some part of her work has only made use of pure nursing skills and this work can be done by any other properly qualified nurse who has not progressed to the health visitor's certificate.

A group of local doctors formed a company for radio-paging: a system by which calls can be sent to a central transmitting station which then sends out signals which are received by an instrument which the doctors wear upon their persons. No verbal messages are given, but the signal means that the doctor has to take the first opportunity of ringing up the central transmitting station to get the details of the reason for which he is being called. They were able to offer us a spare place in this system for one of our midwives and this has proved exceedingly useful. When all the midwives are out about their work and one is needed in a hurry we have, hitherto, had to send a messenger following her day's programme of visits until she could be found whereas, now, we can send out a radio signal and

have at least one telephone almost immediately. It is hoped to extend this system to additional midwives in the future.

Very few organisations make adequate use of modern inventions which are valuable to them and local government is no exception. I am afraid that my successor, at the end of this century, will wonder how on earth I managed to control a department of three hundred people, the bulk of whom are working away from any central station during most of the day, without having everyone on two-way radio communication. He will also probably wonder why most of these people had to go back to the office for some part of the day to spend an hour or two writing about the work which they had been doing when portable tape recorders are available on which all these records could be made while on the job and transcribed, if necessary, by one or two audio-typists in the department. My office, like some other departments of the Council, is at a distance from the Guildhall and innumerable journeys are made to and fro which could be avoided by the use of closed circuit television so that I could speak to colleagues or committees sitting in the Guildhall without making the comparatively short journey which, nevertheless, takes so very long with present day traffic congestion. Often a document has to be sent to and fro for someone to glance at (such as a plan of a new building) when the matter could be settled in half a minute by holding it up in front of a television screen so that someone at a distance could say 'yes' or 'no' to some small point. All these aids cost money but, usually, less than the number of staff which the lack of them requires, and they are certainly better, for getting work done, than non-existent staff (and they often are non-existent nowadays).

A change in the pattern of services provided is shown by the discontinuing of two old-established institutions, the ante-natal clinics and the artificial sunlight clinics. Ante-natal work is very largely done in the patient's home or hospital by doctor or midwife and very few people want to make the journey to a special clinic on a special day. This has been found all over the country in the last fifteen or twenty years. The provision of artificial sunlight has also become quite unnecessary in a day and age when people lead healthier, better fed lives and expose themselves to the natural sun and atmosphere much more than was the case 30 or 40 years ago.

Two additions to our services have been the introduction of immunisation against measles and the provision of domiciliary family planning. It has always been possible to get contraceptive advice by attending a special clinic but it is a new departure to go to people in their own homes. In this way (judging from experience in other places) we get into touch with people who desperately need advice but who are not of a character likely to go to a clinic for it.

I have the honour to be,

Mr Mayor, Ladies and Gentlemen,

Your obedient servant,

CYRIL G. EASTWOOD,

*Medical Officer of Health and
Principal School Medical Officer*

Part I

ORGANIZATION AND ADMINISTRATION

SECTION 1. THE COMMITTEES MOST CONCERNED WITH THE WORK OF THE DEPARTMENT

PUBLIC HEALTH AND WELFARE COMMITTEE (1968-69)

Chairman ALDERMAN RIDGEON

COUNCILLOR MRS BURN

COUNCILLOR GARNER

(*Vice-Chairman*)

COUNCILLOR GODDARD

COUNCILLOR MRS HOWE

COUNCILLOR REED

COUNCILLOR STEELE

COMMITTEE FOR EDUCATION (1968-69)

Chairman COUNCILLOR CROSSMAN

THE MAYOR

ALDERMAN AMEY

ALDERMAN DEAN

ALDERMAN MRS HENN

ALDERMAN HICKSON

ALDERMAN RIDGEON

(*Vice-Chairman*)

COUNCILLOR MISS CANE

COUNCILLOR CORNELL

COUNCILLOR MRS DAVID

COUNCILLOR FOOTE

COUNCILLOR GRANFIELD

COUNCILLOR MRS KALDOR

COUNCILLOR MRS KER

COUNCILLOR MRS MORSE

COUNCILLOR TOBIN

THE VEN. M. CAREY

DR W. HAMILTON

MRS G. HICKSON

MR A. HOLDEN

MISS D. A. HUMPHRIES

MR E. S. MANSFIELD

COUNTY ALDERMAN MRS HEPHER

COUNTY ALDERMAN MRS PARSONS

COUNTY ALDERMAN PAYNE

Primary Education and Special Services Sub-Committee (1968-69)

Chairman ALDERMAN DEAN

THE MAYOR

ALDERMAN AMEY

COUNCILLOR CORNELL

COUNCILLOR CROSSMAN

COUNCILLOR MRS DAVID

COUNCILLOR FOOTE

COUNCILLOR GRANFIELD

COUNCILLOR TOBIN

THE VEN. M. CAREY

MRS G. HICKSON

MISS D. A. HUMPHRIES

MR E. S. MANSFIELD

COUNTY ALDERMAN MRS HEPHER

Special Schools Sub-Committee (1968)

Chairman ALDERMAN DEAN

ALDERMAN AMEY

COUNCILLOR MRS DAVID

COUNCILLOR MRS MORSE

MRS P. R. BURNET

MR C. GENT

HOUSING COMMITTEE (1968-69)

Chairman COUNCILLOR CUNINGHAM

THE MAYOR

(Vice-Chairman)

ALDERMAN DR MAITLAND

COUNCILLOR MRS BURN

COUNCILLOR MRS CHAYTOR

COUNCILLOR POWLEY

COUNCILLOR REILLY

COUNCILLOR TOBIN

COUNCILLOR P. C. WRIGHT

SECTION 2. STAFF AND ORGANIZATION OF THE DEPARTMENT

PRINCIPAL OFFICERS OF THE DEPARTMENT

Medical Officer of Health and Principal School Medical Officer

CYRIL G. EASTWOOD, M.D., CH.B., B.Sc., M.R.C.S., L.R.C.P., D.P.H.,
F.R.S.H.

Deputy Medical Officer of Health and Deputy Principal School Medical Officer

BARRY J. COOPER, B.A., M.B., CH.B., L.R.C.P., M.R.C.S., D.P.H.,
D.R.C.O.G., D.C.H.

Senior Assistant Medical Officer

ANNA M. HARGREAVES, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.

Principal School Dental Officer

J. R. TOLLER, M.D.S., L.D.S.

Chief Public Health Inspector

J. F. EDWARDS ^{1 2 3 4}

Chief Administrative Assistant

R. J. MITTON, M.R.I.P.H.H., A.R.S.H.

¹ Certificate of the Royal Society of Health and Sanitary Inspectors' Joint Board

² Meat and Foods Certificate of the Royal Society of Health

³ Certificate in Sanitary Science of the Royal Society of Health

⁴ Certificate in Smoke Inspection of the Royal Society of Health

ORGANISATION OF THE DEPARTMENT

The Medical Officer of Health (DR C. G. EASTWOOD), The Deputy Medical Officer of Health (DR B. J. COOPER) and secretary (MISS M. SMITH) work as a team in the overall management of the department and deal with matters concerning infectious disease. Apart from this the department is divided into four main divisions: the Administration and Supplies division, the Environmental Hygiene division, the Medical and Welfare Services division and the School Dental Service division. The Medical and Welfare Services division covers such a wide range of functions that it is further sub-divided into sections and one or two of the larger sections contain separately organised sub-sections.

ADMINISTRATION AND SUPPLY DIVISION

Principal functions. All matters relating to advertising for, interviewing and appointing staff, testimonials, staff housing, wages, salaries and time sheets, regrading, absences and car allowances. Ordering and purchase of goods and equipment and keeping inventories of these. Everything to do with the checking and payment of accounts. Alterations to and maintenance of buildings. The supply of uniforms and protective clothing. The preparation of the annual estimates and agendas and reports for committees.

Staff: Chief Administrative Assistant: (MR R. J. MITTON—
Head of Division)
Administrative Assistant: (MR I. SHAW)
Accounts Clerk
Correspondence Clerk
3 other clerks

ENVIRONMENTAL HYGIENE DIVISION

Principal functions: Atmospheric pollution, purity of the water supply, supervision of the sale of food and drugs, inspection of meat and slaughter-houses and supervision of food premises and catering establishments. Repairs to houses, improvement of old houses or their closing and demolition. Disinfestation of premises, inspection of factories, offices, shops, railway premises and common lodging houses. Administration of the Rag Flock Acts, Diseases of Animals (Waste Foods) Order, Animal Boarding Establishments Act and Riding Establishments Act. Rodent Control, noise abatement and the control of caravan sites.

Staff: Chief Public Health Inspector: (MR J. F. EDWARDS—
Head of Division)
Deputy Chief Public Health Inspector: (MR R. BURFIELD)
9 Public Health Inspectors
3 Meat Inspectors
2 Technical Assistants
2 Pupil Inspectors
Senior Clerk
Clerk
Shorthand/typist
Driver/handyman
4 Ratcatchers

MEDICAL AND WELFARE SERVICES DIVISION

Principal functions: Home helps, health visiting, home nursing, midwifery and infant welfare. The School Health Services. Welfare of old people, the blind, disabled, partially sighted, physically handicapped and mentally sub-normal or mentally ill.

Staff: Senior Assistant Medical Officer: (DR A. M. HARGREAVES—
Head of Division)

Seymour House Geriatric Centre Sub-section

Superintendent: (MR G. DODD—*Head of Sub-section*)

Deputy Superintendent: (MRS N. J. YOUNG)

3 Attendants

Physiotherapist

Occupational therapist

Cook

3 Domestic helpers

Driver/handyman

Nursing Services Section

Superintendent Nursing Officer: (MISS M. LIVESEY*—
Head of Section)

Deputy Superintendent Nursing Officer

17 Health Visitors

16 District Nurses

12 Midwives

Part-time Clerk

Maternity and Child Health Service Section

Assistant Medical Officer: (DR S. B. ORAM—*Head of Section*)

Part-time Medical Officers

Section Clerk

2½ Clerks

Sedley Nursery Sub-section

Matron: (MRS E. CALLOW—*Head of Sub-section*)

Deputy Matron: (MRS WATSON)

Warden: (MISS RACEY)

3 Nursery Nurses

Nursery Assistant

4 Nursery Students

Cook

2 Domestic Helpers

School Health Service Section

School Medical Officer: (DR M. MASINA—*Head of Section*)

3 Consultant and part-time medical officers

Physiotherapist

Audiometrician

Section Clerk

2 Clerks

*Miss Livesey replaced Miss Worsford, who left in February 1968

Cerebral Palsy Unit Sub-section

Senior Physiotherapist: (MRS M. P. SKEVINGTON—
Head of Sub-section)
2 Physiotherapists

Speech Therapy Sub-section

Part-time Senior Speech Therapist: (MRS H. HRAMTSOV—
Head of Sub-section)
4 part-time Speech Therapists

Home Help Section

Home Help Organiser: (MRS M. COOPER—*Head of Section*)
Deputy Home Help Organiser: (MISS GIBSON)
Clerks
Home Helps

Blind and Disabled Welfare Section

Senior Welfare Officer (Mr A. L. Wright—*Head of Section*)
3 Welfare Officers
Welfare Assistant
Senior Clerk
Part-time Clerk/Typist

Mental Health Section (housed at 19 Gloucester Street)

Senior Mental Welfare Officer: (MR BULLWINKLE—
Head of Section)
2 Mental Welfare Officers

SCHOOL DENTAL SERVICE DIVISION

Functions: Dental care of expectant and nursing mothers. Dental inspection and treatment of school children.

Staff: Part-time Principal School Dental Officer: (MR J. R. TOLLER
—*Head of Division*)
Area Dental Officer and Orthodontist: (MR A. B. HEWITT)
4 Dental Officers
4 Dental Auxiliaries
5 Dental Surgery Assistants
Dental Technician

SUMMARY OF ESTABLISHMENT

Posts	Establishment		Posts Filled		Notes
	Full time	Part time	Full time	Part time	
Medical Officers	5	—	5	—	
Medical and Surgical Consultants ..	—	4	—	4	
Anaesthetist	—	—	—	—	
Dental Officers	5	1	2	1	
Dental Auxiliaries	—	—	2	—	
Dental Technicians	1	—	1	—	
Dental Surgery Assistants	5	1	4	—	
Public Health Inspectors	11	—	11	—	
Pupil Inspectors	4	—	2	—	
Meat Inspectors	3	—	2	—	
Superintendent Nursing Officer and Deputy	2	—	1	—	
Health Visitors and School Nurses ..	18	—	14	4	1 <i>Queen's Nurse</i>
District Nurses	16	—	15	3	4 <i>Queen's Nurses</i>
Midwives	12	—	9	1	
Mental Welfare Officers	3	—	3	—	
Physiotherapists	3	1	3	1	
Speech Therapists	—	5	—	5	
Orthoptist	—	1	—	1	
Audiometrician	—	1	—	1	
Welfare Officers	4	—	4	—	
Welfare Assistant	—	1	—	1	
<i>Nursery Staff:</i>					
Matron, Deputy Matron, Warden, Nursery Nurses and Assistants ..	7	—	7	—	
<i>Geriatric Day Centre Staff:</i>					
Superintendent, Deputy Superintendent, Attendants, Ambulance Driver, Occupational Therapist ..	7	—	6	—	
Administrative and clerical	21	—	20	3	
Sanitary	7	—	7	—	
Domestic—Sedley Nursery	—	3	—	2	
—Seymour House	—	4	—	4	
—Others	—	1	—	1	
Home Help Organizer and Deputy ..	2	—	2	—	
Home Helps	90	—	29	89	<i>equivalent to 73 full time</i>

Public Health specialists are required by law to be registered medical practitioners with an approved post-graduate qualification in public health. They are the only medical specialists for whom such a legal requirement exists. Public health training embraces such things as law, administration, building construction, food hygiene and some aspects of civil engineering. The minimum period of training in medicine and public health is 8 years, but this takes no account of periods devoted to gaining necessary experience.

Public Health Inspectors are also required to undergo a prescribed training and to obtain a prescribed qualification. This training covers law, administration, food hygiene and meat inspection, building construction and some aspects of sanitary and civil engineering. The basic course lasts for four years.

Meat Inspectors have a course of training leading to a certificate, after which they work, subject to supervision by fully qualified Public Health Inspectors.

Health Visitors are required to be State Registered Nurses who have also taken the first part of the midwives' examination (many qualify as midwives). They then proceed to a year's training in social work and are, in fact, the chief general social workers of a Health Department. The minimal training period in nursing and health visiting is four and a half years, quite apart from obtaining practical experience. An alternative form of training recently introduced is a four years' course of combined nursing and social work.

Dental Auxiliaries carry out dental work under the supervision and to the prescription of a qualified dentist. They fill the teeth of children, extract temporary teeth, perform scaling and give dental health education. The course of training lasts two years.

Dental Surgery Assistants help the dentist in his chairside work very much as a nurse helps a surgeon through an operation.

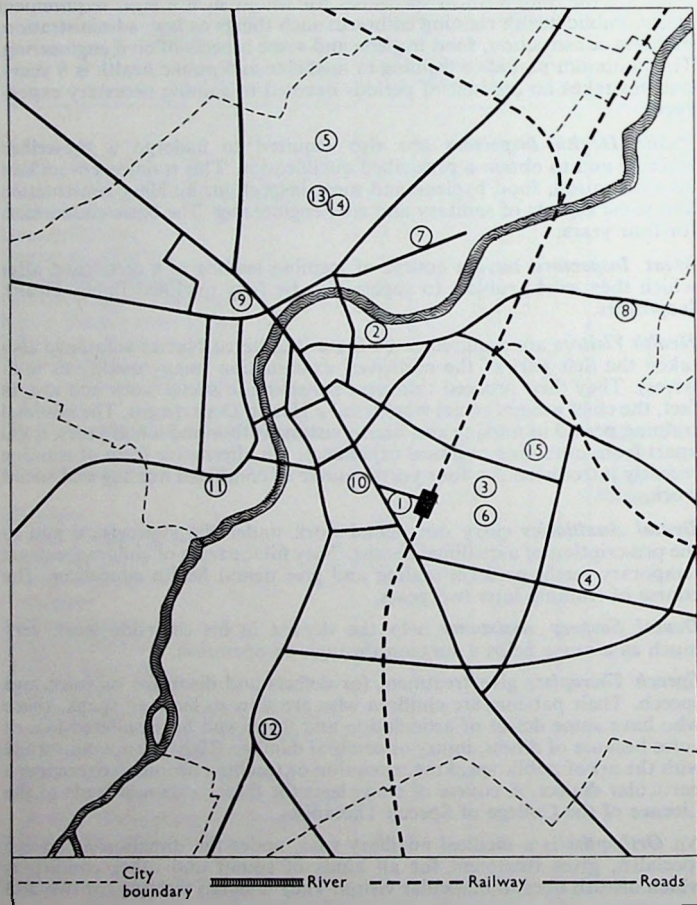
Speech Therapists give treatment for defects and disorders of voice and speech. Their patients are children who are slow to learn to speak, those who have some defect of articulation and those who have suffered loss of voice because of illness, injury or cerebral damage. They are not concerned with the art of public speaking, elocution or teaching people to overcome a particular dialect. A course of study lasts for three years and leads to the Licence of the College of Speech Therapists.

An **Orthoptist** is a medical auxiliary who, under the direction of an eye specialist, gives treatment for all kinds of squint and other conditions which disturb normal binocular vision. They undergo training for two and a quarter years to obtain the necessary qualification.

An **Audiometrician** tests the hearing by means of an audiometer—an instrument which determines accurately the range of pitch which each ear of a person can detect.

The nature of other posts on the establishment will be apparent from the designations.

PREMISES USED BY THE DEPARTMENT



- | | | |
|------------------------|--------------------------|--|
| 1 Kett House | 6 Sedley Nursery | 11 Newnham Clinic |
| 2 Auckland Road Clinic | 7 Chesterton Clinic | 12 Trumpington Clinic |
| 3 Romsey Clinic | 8 East Barnwell Clinic | 13 Lady Adrian School |
| 4 Cherry Hinton Clinic | 9 Castle Street Clinic | 14 Roger Ascham School |
| 5 Kingsway Clinic | 10 Norwich Street Clinic | 15 Seymour House
Geriatric Day Centre |

THE COST OF THE DEPARTMENTAL SERVICES

This Report deals with the calendar year 1968 but the Council's financial year runs from April to the following March. Because of this, it is difficult to give the cost of the various services for the period under review but the following figures (for the financial year ended March 31st 1969) are reasonably relevant.

<i>Service</i>	<i>Net expenditure £</i>	<i>Net expenditure per head of population £ s. d.</i>	<i>Net expenditure per head per week (pence)</i>
Environmental health	47,557	9 3	2.13
School Health Service	37,981	7 7	1.75
Other Welfare Services	161,308	1 12 1	7.40

Note: The population used is the Registrar General's estimated population in June 1968 (100,470).

Part II

**GENERAL STATISTICS
OF HEALTH AND
DISEASE**

SECTION 1. STATISTICAL SUMMARIES

STATISTICAL SUMMARY FROM 1875

	1875	1880	1890	1900	1910	1920	1930	1940	1950	1960	1961	1962	1963	1964	1965	1966	1967	1968
Population ..	30078	35000	41070	38607	40509	60154	60730	79140	90470	93840	94810	95380	96020	98390	99270	99830	100340	100470
Marriages ..					307	563	449			728	672	722	758	752	776	787	837	891
Marriage Rate ..					15.1	18.7	14.7			15.5	14.1	15.1	15.7	15.2	15.6	15.7	16.7	17.7
1. Live Births ..	881	1040	934	923	799	1219	761	893	1322	1418	1448	1442	1478	1588	1494	1421	1353	1318
Live Birth Rate ..	29.3	29.7	22.7	23.9	19.7	20.2	12.5	11.3	14.6	15.1	15.2	15.1	15.3	16.1	15.0	14.2	13.5	13.1
Still Births ..	59				26	28	44	16	33	18	16	23	23	17	14	25	16	14
Still Birth Rate ..	94.7				31.5	22.4	54.6	17.6	24.3	12.5	10.9	15.6	15.5	10.5	9.2	17.2	11.7	10.6
Total Births ..	940				825	1247	805	909	1355	1436	1464	1465	1501	1605	1508	1446	1369	1332
Total Deaths ..	532	606	656	604	513	568	680	949	885	917	1023	958	984	950	880	955	953	990
1. Death Rate ..	17.7	17.3	15.9	15.9	12.6	9.4	11.3	11.9	9.7	9.7	10.7	10.0	10.2	9.6	8.8	9.5	9.5	9.8
2. Infant Mortality ..		168	134	122	61	50	31	34	26	26	22	22	23	18	25	16	21	17
I.M. Rate ..		161	143	132	76	41	40	38	19.6	18.3	15.1	15.2	15.5	11.3	16.7	11.2	15.5	12.9
Legitimate I.M. Rate ..					9.5		36	35	18.4	17.9	15.3	15.5	15.3	10.8	16.7	12.2	12.2	11.7
Illegitimate I.M. Rate ..					95.2				41.0	24.0	12.6	10.6	18.6	18.1	16.8	—	47.2	23.8
3. Neonatal Mortality ..										16	16	19	18	16	19	9	15	12
N.M. Rate ..										11.2	11.0	13.1	12.1	10.0	13.4	6.3	11.1	9.1
4. Illegitimate Live Birth Rate ..					5.3	5.1	4.4		5.5	5.8	5.4	6.5	7.2	6.9	7.9	8.2	9.4	9.5
Maternal Deaths ..							4	3	—	—	1	—	—	—	—	—	1	—
Maternal Mortality Rate ..							4.9	3.3	—	—	0.6	—	—	—	—	—	0.7	—

The records began in 1875 but, as they are incomplete, some of the figures for earlier years are approximations

For explanation of the various rates see the Statistical Summary for 1968

1. Uncorrected.
2. Deaths under 1 year.
3. Deaths under 4 weeks.
4. Illegitimate births per cent. of total live births.

STATISTICAL SUMMARY, 1968

	Cambridge	England and Wales
Area (acres)	10,057	
Population: Census, 1961	95,358	
Registrar-General's estimate at June 30th, 1968 (including 10,317 University Population)	100,470	
Number of persons per acre	9.99	
Number of Inhabited Houses	31,032	
Number of Council Houses	9,035	
Estimated Rateable Value	£5,916,283	
Estimated Sum represented by a penny rate	£23,750	

Marriages

Number of Marriages	Total	891
Marriage rate (number of persons marrying per 1,000 population)		17.8

Births

Live Births—		
{ Legitimate 1,192 (629 males, 563 females) } Total	1,318	
{ Illegitimate 126 (62 males, 64 females) }		16.9
Live Birth rate (number of births per 1,000 population)	13.1	
Live Birth rate corrected by comparability factor (0.97) *	12.7	
Illegitimate live births per cent of total live births	9.5	
Still Births { Legitimate 11 (4 males, 7 females) } Total	14	
{ Illegitimate 3 (3 males, — female) }		14.0
Still Birth rate (number of still births per 1,000 total births)	10.5	
Total Live and Still births	1,332	

Deaths

494 males, 496 females	Total	990	
Death rate (number of deaths per 1,000 population)		9.8	11.9
Death rate corrected by comparability factor (1.03) *		10.0	
Maternal deaths (including abortion)		—	
Maternal mortality rate (maternal deaths per 1,000 live and still births)		—	
Infants deaths under 1 year { Legitimate 14 } Total	17		
{ Illegitimate 3 }			
Total infant mortality rate (deaths under 1 year per 1,000 live births)	12.9		18.0
Legitimate infant mortality rate (legitimate deaths under 1 year per 1,000 legitimate live births)	11.7		
Illegitimate infant mortality rate (illegitimate deaths under 1 year per 1,000 illegitimate live births)	23.8		
Neonatal mortality (deaths in { Legitimate 10 } Total	12		12.3
first 4 weeks) { Illegitimate 2 }			
Neonatal mortality rate (deaths in first 4 weeks per 1,000 live births)	9.1		
Early neonatal mortality (deaths in 1st week)	8		
Early neonatal mortality rate (deaths in 1st week per 1,000 live births)	6.0		10.5
Perinatal mortality (combined still-births and deaths in 1st week)	22		
Perinatal mortality rate (combined still-births and deaths in 1st week per 1,000 live and still-births)	16.5		25.0

* See page 21 for explanation of Comparability Factor.

SECTION 2. VITAL AND MORTAL STATISTICS

POPULATION

The Registrar-General's estimate of the population of the City on June 30th 1968 was 100,470. This includes 10,317 members of the University. In 1967, the estimated total was 100,340 and the number of members of the University was 10,201.

Natural Increase of the Population The following figures show the natural increase or the excess of births over deaths since 1875:

Year	Population ¹	Live Births	Deaths	Natural Increase
1875	30078	881	532	349
1900	38607	923	604	319
1925	59020	838	609	229
1950	90470	1322	885	437
1960	93840	1418	917	501
1961	94810	1448	1023	425
1962	95380	1442	958	484
1963	96020	1478	984	494
1964	98390	1588	950	638
1965	99270	1494	880	614
1966	99830	1421	955	466
1967	100340	1353	953	400
1968	100470	1318	990	328

¹= Mid year estimate

MARRIAGES

There were 891 marriages of Cambridge people during 1968. The number of people marrying was, thus, 1,782, which gives a marriage rate (number of persons marrying per 1,000 of the population) of 17.8.

BIRTHS

The following table gives particulars of the city births for 1968:

	Live Births		Still Births	
	Legitimate	Illegitimate	Legitimate	Illegitimate
Males	629	62	4	3
Females	563	64	7	—
	1192	126	11	3
	1318		14	
TOTAL				
Number of males born per 100 females	110.2			
Birth rates	13.1		10.6	
Live birth rate corrected by comparability factor (0.97)	12.7		—	

1675 children were born in Cambridge to parents not resident in the city. These are registered in the usual way, but are not included in the above table. 39 children, whose parents are Cambridge residents, were born outside the city, and these are included in the table.

The crude live birth rate was 13.1 births per 1,000 population. The rate for England and Wales is 16.9 and the average Cambridge rate for the last ten years is 14.7.

Comparison between our birth rate and that of other towns is complicated by the fact that all towns do not have a population of the same composition. Some places attract a larger number of retired people, and so the birth rate may seem unduly low. New industrial areas may have a high proportion of young married people with a correspondingly high birth rate. The Registrar-General, therefore, calculates a comparability factor and, when this is applied to the crude birth rate, the resulting figure is what the birth rate would be if Cambridge had a theoretical standard population. When all birth rates are based upon this same standard population, comparison of one with another becomes possible and useful.

Births in Institution The proportion of infants born in Nursing Homes and Hospitals was 67.3 per cent of the total births, the same percentage as the preceding year.

The following is a summary of institutional births belonging to Cambridge:

	<i>Births</i>	<i>Percentage of total Births</i>
Private Nursing Homes	61	4.6
Maternity Hospital	835	62.7

DEATHS

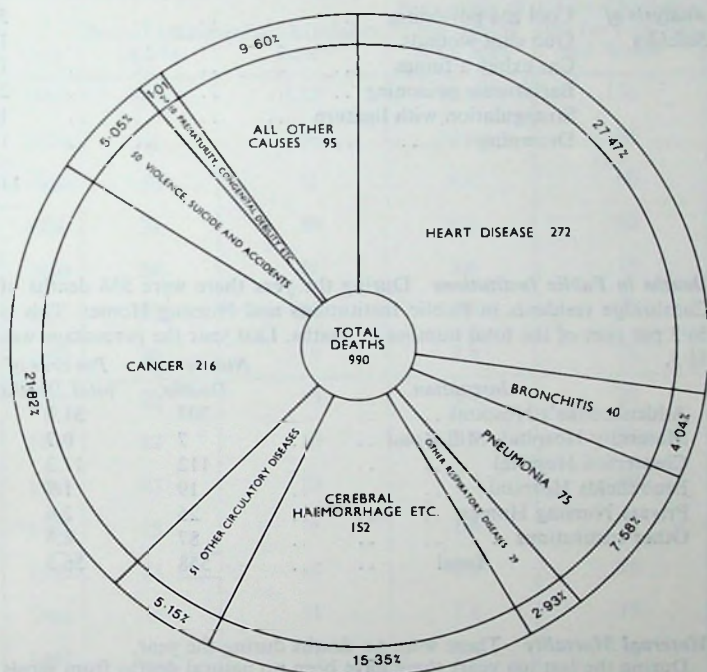
The number of deaths recorded was 990 (494 males, 496 females) an increase of 37 compared with 1967. Cambridge residents who died away from the city are included in these figures. Strangers who died while in Cambridge are excluded.

The crude death rate was 9.8 per 1,000 of the population. The rate for England and Wales was 11.9.

As in the case of the birth rate, correction of the death rate by a comparability factor is statistically desirable. The factor in this case is 1.03 and the corrected death rate is 10.0.

Causes and Ages of Death during the Year 1968

Causes of Death	Total all ages	Under 4 weeks	4 weeks and under 1 year	AGE IN YEARS											75 and over
				1	5	15	25	35	45	55	65				
Enteritis and other Diarrhoeal Diseases	1	—	1	—	—	—	—	—	—	—	—	—	—	—	
Tuberculosis of Respiratory System	2	—	—	—	—	—	—	—	—	1	1	—	—	—	
Other Tuberculosis including late effects	1	—	—	—	—	—	—	—	—	—	—	—	—	—	
Other Infective and Parasitic Diseases	4	—	—	—	1	2	—	—	—	—	1	—	—	—	
Malignant Neoplasm—Stomach	14	—	—	—	—	—	—	—	2	4	3	—	—	5	
—Lung, Bronchus	59	—	—	—	—	—	—	—	2	6	10	28	13	—	
—Breast	29	—	—	—	—	—	—	—	—	8	7	6	2	8	
—Uterus	4	—	—	—	—	—	—	—	—	1	1	2	—	—	
Leukaemia	6	—	—	—	1	—	—	—	1	1	1	2	—	—	
Other Malignant Neoplasms	103	—	—	—	—	—	1	6	8	22	27	39	—	—	
Benign and Unspecified Neoplasms	1	—	—	—	—	—	—	—	—	—	—	—	—	—	
Diabetes Mellitus	4	—	—	—	—	—	—	—	—	—	1	1	—	2	
Other Endocrine etc., Diseases	2	—	—	—	1	—	—	—	—	—	—	1	—	—	
Other Diseases of Blood	2	—	—	—	—	—	—	1	—	—	—	—	—	—	
Mental Disorders	1	—	—	—	—	—	—	—	—	—	1	—	—	—	
Other Diseases of Nervous System	12	—	—	—	—	2	1	—	2	1	3	—	—	3	
Chronic Rheumatic Heart Disease	9	—	—	—	—	—	—	—	—	—	2	5	—	2	
Hypertensive Disease	19	—	—	—	—	—	—	—	—	—	4	7	—	8	
Ischaemic Heart Disease	204	—	—	—	—	—	—	—	1	13	36	64	90	—	
Other Forms of Heart Disease	40	—	—	—	—	—	—	—	—	2	3	5	30	—	
Cerebrovascular Disease	152	—	—	—	—	—	—	—	2	4	12	26	108	—	
Other Diseases of Circulatory System	51	1	—	—	—	—	—	—	—	2	4	11	33	—	
Influenza	14	—	—	—	—	—	—	—	—	—	1	2	—	11	
Pneumonia	75	—	—	—	1	—	2	—	—	3	5	11	53	—	
Bronchitis and Emphysema	40	—	—	—	—	—	—	—	—	—	6	12	22	—	
Asthma	2	—	—	—	—	—	—	—	—	—	—	1	—	—	
Other Diseases of Respiratory System	11	—	2	—	—	—	—	—	—	—	1	1	7	—	
Peptic Ulcer	2	—	—	—	—	—	—	—	—	—	—	—	—	2	
Appendicitis	2	—	—	—	—	—	—	—	—	1	—	1	—	—	
Intestinal Obstruction and Hernia	8	2	—	—	—	—	—	—	—	—	—	3	3	—	
Cirrhosis of Liver	1	—	—	—	—	—	—	—	—	—	—	—	1	—	
Other Diseases of Digestive System	14	—	—	—	—	—	—	—	—	—	1	5	8	—	
Nephritis and Nephrosis	7	—	—	—	—	—	—	—	2	—	1	1	3	—	
Hyperplasia of Prostate	2	—	—	—	—	—	—	—	—	—	—	1	1	—	
Other Diseases, Genito-Urinary System	11	—	—	—	—	—	—	—	—	—	2	6	3	—	
Diseases of Musculo-Skeletal System	9	—	—	—	—	—	—	—	—	—	—	4	5	—	
Congenital Anomalies	8	2	1	1	1	—	—	—	1	—	1	—	1	—	
Birth Injury, Difficult Labour, etc.	4	4	—	—	—	—	—	—	—	—	—	—	—	—	
Other Causes of Perinatal Mortality	2	2	—	—	—	—	—	—	—	—	—	—	—	—	
Symptoms and Ill-Defined Conditions	6	—	1	1	—	—	—	—	—	—	—	1	3	—	
Motor Vehicle Accidents	15	—	—	1	1	4	—	—	1	—	4	2	2	—	
All Other Accidents	24	1	—	—	—	—	—	3	1	1	—	4	14	—	
Suicide and Self-Inflicted Injuries	11	—	—	—	—	2	1	2	2	1	1	—	2	1	
All Other External Causes	2	—	—	—	—	—	—	—	—	1	—	—	—	1	
TOTAL ALL CAUSES	990	12	5	5	4	13	7	19	58	135	248	484			



Deaths from Cancer of Lung and Bronchi

1957	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968
24	43	30	41	40	59	42	43	47	56	47	59

<i>Analysis of Accidental Deaths</i>	Road Accidents	..	..	..	..	..	..	..	..	..	15
	Consequent upon a fall	..	..	..	..	..	..	..	..	..	7
	Barbiturate poisoning	..	..	..	..	..	..	..	..	..	3
	Coal gas poisoning	..	..	..	..	..	..	..	..	..	4
	Drowning	..	..	..	..	..	..	..	..	..	4
	Disconnection from Mechanical Respirator	..	..	..	..	..	..	..	..	..	1
	Unexplained cot deaths	..	..	..	..	..	..	..	..	..	2
	Severe Burns	..	..	..	..	..	..	..	..	..	2
	Inhalation of Smoke	..	..	..	..	..	..	..	..	..	1
											39

Analysis of Suicides	Coal gas poisoning	5
	Gun shot wounds	1
	Car exhaust fumes	1
	Barbiturate poisoning	2
	Strangulation with ligature	1
	Drowning	1
		<hr/> 11 <hr/>

Deaths in Public Institutions During the year there were 558 deaths of Cambridge residents in Public Institutions and Nursing Homes. This is 56.3 per cent of the total number of deaths. Last year the percentage was 55.5.

<i>Institution</i>	<i>Number of Deaths</i>	<i>Per cent of total Deaths</i>
Addenbrooke's Hospital	307	31.0
Maternity Hospital, Mill Road	7	0.7
Chesterton Hospital	112	11.3
Brookfields Hospital	19	1.9
Private Nursing Homes	26	2.6
Other Institutions	87	8.8
Total	<u>558</u>	<u>56.3</u>

Maternal Mortality There were no deaths during the year.

During the last ten years there have been no natural deaths from sepsis but two from other causes. This gives death rates (per 1000 births) of *nil* and 0.138 respectively.

Infant Mortality By infant mortality is meant the number of deaths of infants under 1 year of age. This was 17 in 1968.

The Infant Mortality rate is the number of deaths under 1 year per 1,000 live births. The rate was 12.9 in 1968. The rate for England and Wales was 18.0.

The Infant Mortality rate is a delicate index of the general healthiness of a community, since infants have a more tenuous grasp of life than older persons, and so tend to be more readily killed by disease and by poor environment. The following table shows the decline in the infant mortality rate during this century.

Year	No. of Infant Deaths	Infant Mortality Rate*	Percentage of total deaths at all ages	Infant Mortality rate for England and Wales*
1900	128	132	21.9	154
1910	61	76	12.0	105
1920	50	41	8.8	80
1930	31	40	4.6	60
1940	34	38	3.6	55
1950	26	20	2.9	30
1960	26	18	2.8	21
1961	22	15	1.4	21
1962	22	15	2.2	21
1963	23	15	2.3	20
1964	18	11	1.8	20
1965	25	17	2.8	20
1966	16	11	1.6	19
1967	21	15	2.2	18
1968	17	13	1.7	18

**These figures are rounded off to the nearest whole number and so may not quite agree with statements elsewhere in this Report*

Net Deaths from Stated Causes at Various Ages under 1 Year

<i>Causes of Death</i>	<i>Under 1 week</i>	<i>1-2 weeks</i>	<i>2-3 weeks</i>	<i>3-4 weeks</i>	<i>Total under 1 month</i>	<i>1-3 months</i>	<i>3-6 months</i>	<i>6-9 months</i>	<i>9-12 months</i>	<i>Total deaths under 1 year</i>
Neo-Natal Asphyxia	2	—	—	—	2	—	—	—	—	2
Congenital Heart Disease and Malformations	2	—	—	—	2	1	—	—	—	3
Premature Birth	1	1	—	—	2	—	—	—	—	2
Other Causes	3	2	1	—	6	2	1	1	—	10
Totals ..	8	3	1	—	12	3	1	1	—	17

Neonatal Mortality The decline in infant deaths shows that they are preventable in great measure, but there is a 'hard core' due to causes which are, probably, irremovable. Various kinds of congenital abnormality and prematurity of birth are examples of such causes of death. These causes operate very early in life, in the first week or fortnight as a rule. It will be seen from the preceding table that 12 out of the 17 infant deaths occurred in the first month, and this may be expressed as a neo-natal mortality rate of 9.1 (deaths under 4 weeks per 1,000 live births).

Early Neonatal Mortality This relates to deaths in the first week of life and is a refinement of the foregoing. There were 8 such deaths in 1968—almost all the neonatal deaths. This gives an early neonatal mortality rate of 6.0 (deaths in the first week per 1,000 live births).

Perinatal Mortality Some causes of early death may equally operate just before birth causing still-birth. Still-births and deaths in the first week of life added together constitute the perinatal mortality. This was 22 in 1968 and gives a perinatal mortality rate of 16.5 per 1,000 still and live-births.

SECTION 3. THE INCIDENCE AND CONTROL OF DISEASE

INFECTIOUS DISEASES NOTIFICATIONS RECEIVED DURING THE YEAR

	Under 1 year	1-2 years	3-4 years	5-9 years	10-14 years	15-24 years	25-44 years	45-64 years	65 yrs over	Age un- known	Total
Scarlet Fever	-	-	6	5	2	1	-	-	-	-	14
Dysentery	-	1	1	1	3	8	2	-	-	-	16
Measles	1	66	96	150	4	-	-	-	-	21	338
Infective Hepatitis	-	-	6	59	32	46	33	9	6	8	199
Tuberculosis:											
<i>Respiratory</i>	-	-	-	2	-	4	3	6	2	-	17
<i>Non-Respiratory</i>	-	-	-	-	-	-	1	-	-	-	1
Whooping Cough	1	6	8	18	-	-	1	-	-	3	37
*Erysipelas	-	-	-	-	-	-	-	1	1	-	2
*Puerperal Pyrexia	-	-	-	-	-	3	2	-	-	1	6

* Ceased to be notifiable in September, 1968

VACCINATION AND IMMUNIZATION

Smallpox During the year 1192 children were vaccinated in the City.

Diphtheria During the year 1281 children were immunised against Diphtheria and 1944 were given a reinforcing injection following earlier immunisation.

Whooping Cough 1248 children were immunised against Whooping Cough, many of these at the same time as Diphtheria immunisation.

Poliomyelitis 1291 children completed a course of immunisation during the year. 998 children were given a booster injection.

Tuberculosis B.C.G. vaccination was continued in schools during the year. 1474 children had skin tests, 89 were positive, 1351 were negative and 1343 were vaccinated.

INVESTIGATION AND DISINFECTION

302 visits were made to houses, schools, hospitals and places of work, investigating infectious diseases. This was additional to visits by medical officers and nursing staff (for which see Part IV of this Report.)

During the year 21 disinfections of premises were carried out. We also assist the police from time to time and have an arrangement with the public libraries for preventing the spread of infection through books. 494 articles of gift clothing for overseas were disinfected here in compliance with government requirements.

After receipt of circulars from the Minister of Health machinery was established to ensure that as far as is possible every immigrant is visited soon after arrival. Arrangements are then made for registration with a general practitioner and for chest X-ray photographs. The system has worked well so far and during the year public health inspectors paid 187 visits.

Part III

ENVIRONMENTAL

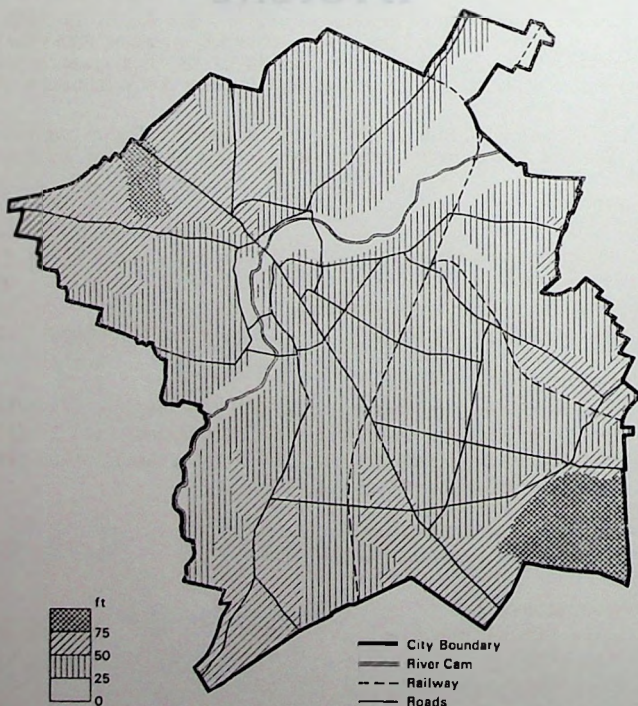
HYGIENE



SECTION 1. NATURAL AND SOCIAL CONDITIONS

TOPOGRAPHY

The City is situated in latitude $52^{\circ} 12' \text{ N.}$ and longitude $0^{\circ} 7' \text{ E.}$, about fifty miles north of London, on the midland side of East Anglia and in the southern part of the Fen District. The City is shaped like a very rough rectangle, about five miles from north to south and four miles from east to west. It is very low lying, the greater part being between 25 and 50 feet above sea level. In three places (near the railway station, at Trumpington and near Madingley) the ground rises above 50 feet and, on the boundary near to Girton, somewhat exceeds 75 feet. The only really high ground within the City boundary is at what may be termed the south eastern 'corner' where, at the beginning of the Roman road and exactly on the City boundary, a height of 225 feet is reached.



The City stands upon clay but this is overlain by gravel in a broad belt extending roughly from south-west to north-east. Through the middle, along this line, flows the River Cam which is the main means of drainage of the City. The river enters the City at the south-west, close to the 25 foot contour and leaves at the north-eastern extremity where the boundary is a little below 25 feet. The water is analysed periodically.

CLIMATE

As part of Great Britain, Cambridge shares in the insular climate but, since it is in a comparatively flat part of the country and facing the continent, it also shares to some extent in the Continental type of climate and falls somewhere between the truly insular and the truly continental. The prevailing winds come from the south-west and the rainfall is low relative to the rest of the country. There is an average of about 21 inches a year, with the greatest fall in October as a rule, and the least rain in February, although the actual number of rainy days is about the same in each of these extreme months.

The hours of sunshine amount to almost 7 per day in the middle of June and fall to less than 2 per day in December, averaging somewhat over 4 for the whole year. The relative humidity is, on the average, about 80, being at a maximum in December and January and a minimum about June.

The following list summarises the principal meteorological observations of 1968 (the figures in brackets are the averages for the past ten years):

Rainfall:

Total	.. .. .	22.81 inches	..	(21.98)
Number of days with rain	..	162	..	(158)
Days with 0.04 inches or more	..	122	..	(110)
Days with less than 0.04 inches	..	40	..	(48)
Heaviest fall in 24 hours	.. ..	1.43 inches (16th Sept.)		(1.31)

Temperature:

Highest temperature in screen	..	87.0°F. (2nd July)	..	(83.9°)
Lowest temperature in screen	..	18.0°F. (10th Jan.)	..	(14.6°)
Lowest grass temperature	..	11.5°F. (17th Nov.)	..	(9.4°)
Number of frosts (<i>i.e.</i> , 32° F. and below) in screen	.. ..	69	..	(62)
Number of ground frosts (<i>i.e.</i> , 30° F. or below on grass)	..	113	..	(106)

Miscellaneous:

Hours of bright sunshine	..	1187.1		(not available)
Days with fog	.. ..	8	..	(14)
Days with thunder	.. ..	2	..	(6)
Days with snow	.. ..	6	..	(14)

INDUSTRIES AND COMMUNICATIONS

The University may be regarded as the oldest and one of the most important 'industries' of the City and, apart from its members, employs directly and indirectly a considerable number of people. The University Press may also be considered one of the city's principal industries. Other important trades and manufacturers are the production of radio and television equipment, scientific instruments, dairy equipment, cement and asphalt. Flour milling is carried on, and there are some other, smaller, industrial activities.

The city is well served by roads and railways, and there is an airport for private aviation immediately outside the boundary.

SECTION 2. THE ATMOSPHERE

ATMOSPHERIC POLLUTION

Smoke Control Orders In 1964 the City Council approved a programme whereby the City was to be covered by 20 Smoke Control Orders, which forbid the emission of smoke from chimneys. Smoke Control Order No. 2, which would have made most of the central area smokeless, was confirmed on 5th May 1966. Financial stringency has caused the date of operation to be postponed until September 1970.

The National Survey of Atmospheric Pollution The Department of Scientific and Industrial Research decided to institute a nation-wide survey extending over several years using improved instruments. By these volumetric gauges smoke and sulphur dioxide are shown, smoke on filter papers and sulphur dioxide by passing air through a standard hydrogen peroxide solution. All quantities are measured, daily readings are taken and sent monthly to Warren Spring Laboratory for analysis by computer. In this way a complete pattern of atmospheric pollution records has been established over the whole country. Although these gauges must be visited daily as against monthly for the old type gauges, the cost is offset because analysis of the findings is free whereas formerly an analyst's fee was paid. The true value of these readings will only be apparent when the Ministry of Technology has collated all the findings.

In addition to four volumetric smoke and sulphur dioxide recorders there are two four-directional gauges designed and made by this Department and sited to monitor fall-out from a particular source. In the course of this investigation (in which we are assisted by the Atmospheric Pollution Division of the Warren Spring Laboratory) a very noticeable amount of copper carbonate was found. The amounts varied month to month and considerable efforts were made to trace the source. With the Area Alkali Inspector visits were made to the suspected works and the trouble has now ceased.

Gauges based on these have been made by and are used by Warren Spring Laboratory to monitor various sources of pollution in the form of wind blown dusts and emissions.

Industrial Pollution 33 observations of chimneys were made and six offenders dealt with informally. Also 46 visits were made in connection with applications for prior approval of new boiler installations and related matters.

SECTION 3. WATER SUPPLIES

THE PUBLIC SUPPLY

Sources of Supply The water supply of the City is provided by the Cambridge Water Company (whose area of supply includes the Rural Districts of Chesterton and South Cambridgeshire, the Borough of St Ives, the Urban District of Ramsey and the Rural District of St Ives) and is obtained from five sources, east, south and south-west of the City. The water comes from a considerable depth in chalk. During 1968 the supply has been entirely satisfactory as regards quality and unrestricted supplies have been maintained.

The Fleam Dyke Well has a daily yield which varies seasonally between 3.0 and 3.6 million gallons. The well is 162 ft. deep and has a water-tight lining from top to bottom. The pumps are capable of delivery at the rate of 160,000 gallons an hour. The water as piped from the well is practically sterile. Although many thousands of samples have been examined *Bacterium Coli* has never once been found in 100 c.c. Despite this fact, a small precautionary dose of 0.08 p.p.m. of chlorine is administered.

The Fulbourn Well has a maximum yield of 2 million gallons a day. The well is 58 ft. deep. The chemical quality of the water is at all times excellent, but it is subject to slight intermittent bacterial pollution. Because of this the well water is given a substantial dose of chlorine (0.5 p.p.m.) followed by a contact period of half an hour before being dechlorinated and turned into supply. Bacteriological examinations (which are made at weekly intervals) have shown that this treatment invariably produces a sterile water.

The Great Wilbraham source comprises duplicate 14 in. diameter boreholes sunk to a depth of 180 ft., and united at a depth of 165 ft. Duplicate electrically driven submersible pumps each having a capacity of approximately 50,000 gallons per hour (1.2 million gallons a day) are installed but only one pump is operated at a time. Water from this source, the quality of which is as high as that from Fleam Dyke, is conveyed through two miles of 12 in. diameter main to Fleam Dyke where it blends with the Fleam Dyke water and receives the same token dose of chlorine.

The Babraham source comprises duplicate 17 in. diameter lined boreholes sunk to a depth of 150 ft. and united at a depth of 126 ft. Duplicate electrically driven pumps, each with a capacity of about 85,000 gallons per hour (2 million gallons a day), are installed but only one pump is operated at a time. After chlorination and dechlorination the water is delivered into the distribution system via three miles of 18 ins. diameter trunk main. To protect the quality of the water at source the Company has constructed and operates a sewage disposal system serving two farms and 14 cottages in the vicinity of the well. The water is not softened and has a hardness of 320 p.p.m.

The Melbourn Source comprises fourteen boreholes each 200 ft. deep, the largest being 48 inch diameter. There are 500 ft. of adits in the Burwell Rock about 150 ft. below the surface of the ground.

This source yields 2.5 to 3.0 million gallons of water a day. After super-chlorination (a dose of 0.5 p.p.m.) and dechlorination the water is delivered into the Cambridge distribution system through 10 miles of 24 inch diameter trunk main. The water is not softened and has a hardness of 300 p.p.m.

Water Softening The water pumped from the Fleam Dyke, Fulbourn and Great Wilbraham Wells has a hardness of 250 p.p.m. At Cherry Hinton the trunk mains conveying the water to the city are tapped, and one half of the total flow is passed through a base-exchange softening plant in which the whole of the hardness is removed. Subsequently the hard and softened portions of the supply are blended so that the water passing into supply normally has a total hardness of 130 p.p.m. only.

Service Reservoirs On high ground round the City there are five covered service reservoirs having a combined capacity of 13.75 million gallons. These are connected to the trunk mains from the five sources of supply and act as balancing tanks. Thus, when the demand exceeds the rate of pumping, the balance flows out of the reservoirs and, conversely, when the rate of pumping exceeds the demand the balance flows into the reservoirs.

Quality of the Water During 1968 the supply has been entirely satisfactory as regards quality and unrestricted supplies were maintained.

During the year the water going into the supply was sampled for both chemical and bacteriological examinations. The water as supplied has no plumbo-solvent properties. The fluoride content of the water is less than 0.1 parts per million. The City and County Councils have agreed to the adjustment of fluoride but technical difficulties have still to be overcome. No contamination of the supply occurred during 1968.

Chemical and bacteriological analysis have been constant and satisfactory throughout.

Number of Samples examined during 1968

			<i>Chemical</i>	<i>Bacteriological</i>
Raw water—Fleam Dyke	..	..	2	12
Raw water—Fulbourn	..	..	15	53
Raw water—Great Wilbraham	..	..	2	12
Raw water—Babraham	..	..	2	14
Raw water—Melbourn	..	..	4	14
Treated water—Fulbourn	..	..	1	52
Treated water—Babraham	..	..	nil	12
Treated water—Melbourn	..	..	nil	11
Drawn from the distribution system	..	..	4	28
The water, as supplied, is always bacteriologically sterile				

The following report on the examination of a sample drawn from the distribution system on 3rd April 1968 may be taken as typical:

Chemical Results in Parts per Million

Appearance. Clear and bright		Turbidity (A.P.H.A. units)	nil
Colour (Hazen)	nil	Odour	nil
pH	7.6	Free Carbon Dioxide	11
Electric Conductivity	480	Dissolved solids dried at 180°C	320
Chlorine present as Chloride	22	Alkalinity as Calcium Carbonate	195
Hardness: Total	145	Carbonate	145
Nitrate Nitrogen	9.0	Non-carbonate	0
Ammoniacal Nitrogen	0.00	Nitrite Nitrogen	Absent
Zinc, copper and lead	Absent	Oxygen absorbed	0.00
Iron	0.10	Residual chlorine	Absent

Analyst's report:

This sample is clear and bright in appearance, on the alkaline side of neutrality and free from metals apart from a negligible trace of iron. The water has very moderate hardness and it contains no excess of mineral constituents. It is of very satisfactory organic quality and of the highest standard of bacterial purity.

Bacteriological Results

	1 day at 37°C	2 days at 37°C	3 days at 20–22°C
Number of Colonies developing on Agar	0 per ml.	0 per ml.	0 per ml.
Presumptive Coliform	Present in — ml	Absent from 100 ml	Probable No 0 per 100 ml
Bact. Coli. (Type 1) ..	— ml	100 ml	0 per 100 ml
Cl. welchii reaction ..	— ml	100 ml	

Analyst's report:

These results are indicative of a pure and wholesome water suitable for public supply purposes.

Supply to Dwelling-houses:

(a) Directly supplied from tap	31,032
(b) Supplied by standpipes	None
(c) Supplied by private wells, etc.	None

SWIMMING BATHS

There are eleven private and three public swimming baths in the city. All were regularly tested for purity during the year and the results were generally good.

In the city council's indoor swimming pool at Parkside the water is heated to 74°F and is constantly re-circulated. During the re-circulation cycle the water is strained and filtered and then re-chlorinated before being heated and returned to the pool. The chlorination level is maintained at 1.5 p.p.m. in the main pool and 0.5 p.p.m. in the small pool. The whole contents of the pools, 22,000 gallons, is circulated every four hours.

SECTION 4. SUPERVISION OF FOOD AND DRUGS

GENERAL FOOD AND DRUGS SAMPLING

Supervision of the sale of food and drugs has three objectives. The first is to ensure that the substance offered is, as the law has it, 'of the nature, substance and quality demanded.' The purchaser is entitled to receive the exact article which he requests. The second objective is to ensure that no harmful or illegal preservatives are used. In either of these cases, informal purchases may be made and subsequently analysed but, if it is thought that legal proceedings may have to be taken, a prescribed method of formal sampling must be used in the presence of a witness. The third objective is to ensure that food, even if it is what it purports to be and does not contain harmful preservatives, is not unfit for human consumption through being kept too long or stored improperly.

Trends in the nature of prosecutions (made under the Food and Drugs Act 1955) throughout England and Wales show an increase in the number of cases relating to mouldy food.

Foods mostly affected include flour confectionery, bread, cakes, fruit and meat pies; sausages and cream products.

The number of complaints about mouldy food dealt with by this Department in 1968 doubled that received in the previous year.

Proceedings were taken in these instances:—

1. Mouldy loaf—result of improper stock rotation—£10 fine.
2. Mouldy tea—result of spoilage—£30 fine + £15 advocates fees.
3. Mouldy fruit pie—sold by mobile vendor 16 weeks after manufacture—£5 fine.

In nearly all cases investigated the fault could be attributed to the lack of a proper stock rotation system at retail level. Most retailers rely on manufacturers' codes and the integrity of the salesmen and do not protect themselves by using a coding system of their own to indicate how long perishable food has been on their premises.

Manufacturers' codes vary in form and significance and some manufacturers assist the work of the public health inspector by making known the key to their own particular code. This information enables the inspector to improve the stock rotation system where this is found to be necessary.

There should be national standardisation of the codes used by manufacturers of prepacked perishable foods which should be made known to both retailers and local authorities. This would go a long way to ensuring that the number of instances of unfit food being sold is greatly reduced.

The following samples were submitted to the Public Analyst in Cambridge during the year:

Informal

	<i>Number</i>	<i>Genuine</i>	<i>Not Genuine</i>
Anchovy Essence	1	1	—
Angelica	1	1	—
A.P.C. Tablets	1	1	—
Artificial Cream	1	1	—
Baby Food	4	4	—
Baking Powder	3	3	—
Blackcurrant Pastilles	1	1	—
Boric Acid	3	3	—
Bovril	1	1	—
Bread	2	—	2
Brown Sugar	1	—	1
Butter	6	6	—
Buttermilk	1	1	—
Cheese	12	12	—
Chicken	1	—	1
Comb Honey	1	1	—
Corn Flour	5	5	—
Cream	7	7	—
Cream Buns	1	—	1
Creamed Potatoes	1	—	1
Dessert Whirl	1	1	—
Dried Mixed Vegetables	1	1	—
Fish Cakes	7	7	—
Flour	3	3	—
Foam Crystals	1	1	—
Fresh Cream Dessert	1	1	—
Gravy Mix	1	1	—
Ham	1	1	—
Hydrogen Peroxide	1	1	—
Ice Cream	19	19	—
Iodine	1	1	—
Italian Peeled Tomatoes	6	6	—
Lime Water	1	1	—
Milk	31	30	1
Mincemeat	1	1	—
Mushroom Ketchup	1	1	—
Paté de Foie	1	1	—
Peach Wine	2	2	—
Pepper	1	1	—
Piccalilli	1	1	—
Pineapple Juice	2	1	1
Pork Luncheon Meat	2	2	—
Potassium Bicarbonate	1	—	1
Preserves	2	2	—
Sauce Mix	1	1	—
Seasoning	1	1	—
Shandy	1	1	—
Sherry	2	—	2
Shortcake Mix	1	—	1
Shrimps	1	1	—
Smoked Mackerel	2	2	—
Soup Powder	1	1	—
Carried Forward	153	141	12

	<i>Number</i>	<i>Genuine</i>	<i>Not Genuine</i>
Brought forward	153	141	12
Spreads	7	7	—
Tea	1	—	1
Tinned Milk	8	8	—
Toasty Grills	1	1	—
Tomato Purée	1	1	—
Vinegar	1	1	—
Water Sterilising Outfit	1	1	—
Zinc Ointment	3	3	—
TOTAL	176	163	13

Formal

	<i>Number</i>	<i>Genuine</i>	<i>Not Genuine</i>
Cream Buns	1	—	1
Ice Cream	1	1	—
Pork Sausages	2	2	—
Whisky	2	2	—
TOTAL	6	5	1

National Pesticide Samples

	<i>Number</i>	<i>Genuine</i>	<i>Not Genuine</i>
Peas	2	2	—
Grapes	1	1	—
Cheese	1	1	—
Bread	1	1	—
Strawberries	1	1	—
TOTAL	6	6	—

MILK

At the end of 1968 the following licences were in force:

	<i>Number</i>
Pasteuriser	1
Dealer in pasteurised milk	99
Dealer in untreated milk	15
Dealer in sterilised milk	45
Steriliser	1
Dealer in ultra heat treated milk	3

No samples of milk for brucella abortus under the Food and Drugs Act, 1955.

126 samples of designated milk were examined with the results given below:

Designation of milk	No. of samples tested	Appropriate test	No. of samples		
			Passed	Failed	Void
Pasteurised	106	Phosphatase	106	—	—
		Methylene Blue	102	3	1
Sterilised	17	Turbidity	17	—	—
Ultra Heat Treated	1	Colony Count	1	—	—
Untreated	2	Methylene Blue	2	—	—

These figures demonstrate the excellent bacteriological quality of the milk supply, particularly praiseworthy in view of the vast scale of the industry.

ICE CREAM

117 samples of ice cream were taken during the year and were examined by the Public Health Laboratory. They were graded according to Ministry of Health procedure as follows:

Grade 1 (Satisfactory)	70
Grade 2 (Fair)	26
Grade 3 (Unsatisfactory)	12
Grade 4 (Very unsatisfactory)	9

The bacteriological standard of wrapped ice cream continued to be satisfactory although a small degree of contamination occurred with the partly wrapped catering portions.

A more serious degree of contamination was found where ice cream was dispensed with a scoop from one gallon bulk containers. The amount of handling involved in serving ice cream in this manner, the regular exposure to air of the open container and the practice of keeping the scoop in warm water to facilitate the scooping of portions, all contributed, at retail level, to lower the high standard of cleanliness achieved by manufacturers.

The advice given by the public health inspector on hygienic handling and the addition of a sterilant to any water in which the dispenser is placed has restored the desired standard.

During the year, routine sampling showed its value when a defect was revealed in one manufacturing plant which was put right without delay.



Meat inspection at a slaughterhouse

LIQUID EGG (PASTEURISATION) REGULATIONS, 1963

There are no egg pasteurisation plants in the City and no samples of liquid egg were submitted to the Alpha-Amylate test during the year.

MEAT INSPECTION

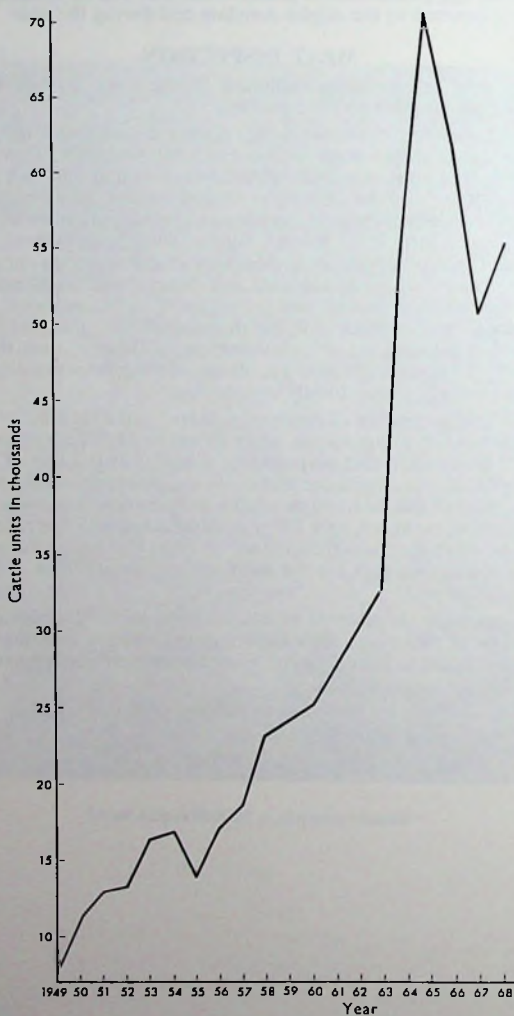
There are five private slaughterhouses in the City, two of which are licensed to export meat to the continent.

The total number of animals killed during the year was 103,287, each animal being inspected both before and after slaughter. Inspectors are present the whole time when slaughtering is done and they carry out ante mortem and post mortem inspection of each animal. Any organ found to be diseased is condemned and any carcass showing evidence of disease is detained until a later stage when a further detailed inspection is carried out. Those carcasses which, in the opinion of the inspector, are unfit for human consumption are condemned and those which are fit are stamped with the identification number and the authority of the inspector. A total of 18,454 animals representing 17.9% of the total kill were found to have some part or organ diseased requiring condemnation. It was found that on the average 10% of pigs slaughtered were detained for further examination and of this number 10% were totally condemned.

The fall in the number of cattle slaughtered (by 695) and of sheep (by 1,093) was probably due to the effect of outbreaks of Foot and Mouth Disease in Shropshire and surrounding counties at the end of 1967 and early months of 1968. These outbreaks, on a scale hitherto unknown in this country, involved the destruction of enormous numbers of animals. There was an increase, however, of 9,359 pigs slaughtered and this reflects in the increase, by over six tons, the amount of meat that was condemned last year. It is found that pigs are the most susceptible of all meat animals to disease.

476 horses were slaughtered at Messrs Pink Bros. of Coldham's Lane who are one of two horse slaughterers in the country licensed to export carcass horse meat to the continent. Four horses were condemned as being unfit for human consumption.

Graph of all animals killed (shown as cattle units) from 1949
 1 cattle unit = 1 beast or 2 pigs or 3 calves or 5 sheep.



Weight of meat condemned

	<i>Tons</i>	<i>Cwts</i>	<i>Sts</i>	<i>Lbs</i>
Beef	49	12	3	8
Mutton	1	7	4	9
Pork	36	9	7	12
Veal	—	5	6	2
	87	15	6	3

Percentage of carcasses

	<i>Cattle, excluding Cows</i>	<i>Cows</i>	<i>Calves</i>	<i>Sheep and Lambs</i>	<i>Pigs</i>
Number killed	15,872	44	189	15,232	71,474
Number inspected	do.	do.	do.	do.	do.
<i>All diseases except Tuberculosis and Cysticerci:</i>					
Whole carcasses condemned	12	13	7	13	304
Carcasses of which some part or organ was condemned	3,065	25	6	578	9,032
Percentage of the number inspected affected with disease other than Tuberculosis and Cysticerci	19.4	86.3	6.9	3.8	13.1
<i>Tuberculosis only:</i>					
Whole carcasses condemned	—	—	—	—	—
Carcasses of which some part or organ was condemned	6	—	—	—	552
Percentage of the number inspected affected with Tuberculosis	0.03	—	—	—	0.7
<i>Cysticercosis:</i>					
Carcasses of which some part or organ was condemned	270	—	—	—	—
Carcasses submitted to the treatment by refrigeration	74	—	—	—	—
Generalised and totally condemned	—	—	—	—	—

Figures for liver fluke, were as follows:

	<i>Cattle</i>	<i>Cows only</i>
1949	15.5%	18.3%
1950	24.4%	16.1%
1951	20.7%	13.0%
1952	20.6%	12.1%
1953	14.7%	8.05%
1954	16.6%	7.9%
1955	28.5%	6.3%
1956	20.4%	3.8%
1957	14.25%	1.9%
1958	21.0%	9.46%
1959	28.74%	9.86%
1960	17.64%	3.8%
1961	16.0%	7.4%
1962	12.4%	4.9%
1963	13.8%	4.1%
1964	13.3%	28.0%
1965	14.8%	Nil
1966	23.4%	0.4%
1967	32.1%	Nil
1968	28.6%	2.3%

This disease caused the loss, during the year, of 2,384 beasts' livers and 2,158 parts, 1 cow's liver, 35 sheep's livers and 4 parts.

The figure for cysticercus bovis, a parasitic disease affecting animals and human beings were as follows:

	<i>Cattle</i>	<i>Cows only</i>
1949	11 cases	
1950	28 cases	7 cases
1951	24 do.	6 do.
1952	41 do.	2 do.
1953	24 do.	— do.
1954	38 do.	1 do.
1955	43 do.	— do.
1956	22 do.	1 do.
1957	66 do.	— do.
1958	82 do.	1 do.
1959	53 do.	— do.
1960	57 do.	— do.
1961	31 do.	— do.
1962	31 do.	— do.
1963	92 do.	— do.
1964	137 do.	— do.
1965	50 do.	— do.
1966	189 do.	— do.
1967	266 do.	— do.
1968	270 do.	— do.

The 270 cases discovered represents 1.7 per cent of all cattle slaughtered.

INSPECTION OF FOOD OTHER THAN MEAT

<i>List of Foods condemned</i>	<i>Tons</i>	<i>Cwts</i>	<i>Sts</i>	<i>Lbs</i>
Apples			6	
Bacon		9	6	7
Biscuits		1	0	0
Butter			3	0
Carrots			7	2
Cereals		2	2	1
Egg white			2	0
Flour		4	3	6
Ham			4	0
Lemon pie filling		1	4	6
Pears			2	0
Powdered soup			3	8
Salt			2	8
Sausages			3	5
Sugar		3	3	0
Tomatoes		3	0	10
Total	1	9	5	11

Frozen Food Packets—2,630

Smaller quantities of the following were also dealt with

Baby foods	Ducks	Peanut butter
Beveridges	Fruit juice	Pickles
Cakes	Ground almonds	Rabbits
Cheese	Hares	Salad dressing
Chickens	Honey	Sauces
Chocolate	Horses	Snack meals
Chow mein	Ice cream	Soft drinks
Cream cheese	Jellies	Stock cubes
Cress	Meat pastries	Tea
Crisps	Melons	Turkeys
Custard powder	Mincemeat	White pepper
Dried fruit	Nut oil	Yoghurt
Dried vegetables	Oysters	

Tinned Goods

Meat	1096
Fish	275
Fruit	3543
Jam/Marmalade	136
Soup	245
Vegetables	2108
Milk	183
Cream	40
Milk puddings	246

SUPERVISION OF FOOD PREMISES

There are 804 food premises in the City and the following figures show the various trades carried out. The difference in the totals is accounted for by the fact that many places sell more than one commodity:

<i>Premises</i>	<i>Number</i>	<i>Fitted to comply with Reg. 16*</i>	<i>Fitted to comply with Reg. 19*</i>
Bakehouses	20	—	1
Butchers shops	75	—	1
Fish and Chip shops	21	1	—
Restaurants	66	3	2
Residential catering	88	—	—
Licensed premises	225	2	1
Food manufacturers	11	—	—
Canteens	92	—	—
Dairies	5	—	—
Stalls	32	4	—
Grocery	104	3	2
Greengrocery	62	—	1
Wet fish dealers	21	1	—
Chemists	17	—	—

* Of the Food Hygiene (General) Regulations, 1960

There are no poultry processing plants within the district.

Certain premises which are used for the manufacture, storage or sale of some kinds of food have to be registered with the Council under Section 16 of the Food and Drugs Act 1955. They are divided as follows:

Manufacture and sale of ice cream	.. .. .	1
Sale only of ice cream	.. .. .	262
Preparation of sausages and potted, pressed or preserved food	.. .. .	79

Two new applications for the sale of ice cream were granted during the year.

Visits made to food premises numbered 2,824, and 133 notices requiring compliance with the Food Hygiene Regulations were given. There were no prosecutions taken under the Regulations.

Nine notices to provide wash basins (Section 16 Food Hygiene (General) Regulations 1960) and five notices to provide sinks for washing equipment or food were served under regulation 19.

SECTION 5. HOUSING

REPAIRS TO HOUSES

Number of houses in which repairs were done:

(a) Housing Act 1957:

(i) formal action —

(ii) informal action 20

Sub-total: 20

(b) Public Health Act 1936:

(i) formal action 2

(ii) informal action 62

Sub-total: 64

TOTAL: 84

This work involved 454 visits.

NEW HOUSES

Houses erected by the Local Authority and private enterprise since 1919.

	<i>Erected by the Local Authority</i>	<i>Erected by others</i>	<i>Total</i>
1920	40	23	63
1921-1930	1226	1192	2418
1931-1940	1417	3382	4799
1941-1950	1558	279	1837
1951-1960	2970	1673	4643
1961	300	349	649
1962	356	246	602
1963	331	241	572
1964	198	441	639
1965	164	259	423
1966	282	324	606
1967	37	204	241
1968	375	240	615
Totals	9254	8853	18107

IMPROVEMENT AND CLEARANCE OF HOUSES

Progress in Housing Clearance

Housing Act, 1957, Sections 16 and 17

(Also voluntary action)

Individual Houses

	<i>Action taken during 1968</i>
Closing orders made	9
Undertakings accepted (not to use for human habitation) . .	10
Undertakings accepted (to make houses fit)	6
Demolitions following Undertakings	16
Demolition (by owners) (Demolition Orders)	10
Demolished by private concerns (voluntarily)	—
Demolished by local authority	1
Purchased by local authority for:	
Temporary accommodation	—
Demolition	—
Improved out of 'demolition' class	—

Housing Financial Provisions Act, 1958. Section 3

Certificates of unfitness:

Issued	5
Demolished	3

Housing Act, 1957. Section 42

Clearance area procedure

Post-war clearance areas:

Demolished	79
Still occupied	32

Allocation of Council houses absorbed during the year: ..	58
Individual unfit houses represented to the Council: ..	28

Houses demolished after action by the Council

Before the year	1930	..	..	..	18
During the years	1930-1939	..	..	..	438
do.	1940-1945 (War Years)	..	..	..	36
During the year	1946	..	..	..	5
do.	1947	..	..	..	-
do.	1948	..	..	..	3
do.	1949	..	..	..	4
do.	1950	..	..	..	7
do.	1951	..	..	..	11
do.	1952	..	..	..	25
do.	1953	..	..	..	19
do.	1954	..	..	..	6
do.	1955	..	..	..	23
do.	1956	..	..	..	66
do.	1957	..	..	..	87
do.	1958	..	..	..	93
do.	1959	..	..	..	102
do.	1960	..	..	..	138
do.	1961	..	..	..	140
do.	1962	..	..	..	172
do.	1963	..	..	..	99
do.	1964	..	..	..	38
do.	1965	..	..	..	72
do.	1966	..	..	..	202
do.	1967	..	..	..	143
do.	1968	..	..	..	106
Total					2053

Standards of fitness People have widely varying ideas of what, in a house, constitutes fitness for human habitation. The law, however, is quite specific and section 4 of the 1957 Housing Act gives a list:

- (a) repair;
- (b) stability;
- (c) freedom from damp;
- (d) natural lighting;
- (e) ventilation;
- (f) water supply;
- (g) drainage and sanitary conveniences;
- (h) facilities for storage, preparation and cooking of food and for the disposal of waste water;

This list is exclusive: one is specifically confined to these points.

Well Maintained Payments The Council approved two well maintained payments totalling £180. Both were for houses included in clearance areas. No payments were made for individual unfit houses.

Improvement Grants The number of applications for standard and discretionary grants continued to increase.

There were 134 approved which was 20% more than the previous year, yet this figure is only a fraction of the thousands of houses in Cambridge which lack the standard amenities in full and which could be improved.

It appears that people, particularly owner/occupiers are reluctant to take advantage of the financial help available. Two reasons for this may be:

- (i) that they cannot afford to pay their half of the costs involved and
- (ii) they do not consider it essential to have a fixed bath or shower; wash basin, hot water and an internal water closet.

Powers exist to compel landlords to improve their houses. These can only be used at the request of the tenant and it is regretted that no single instance of this has been found in Cambridge.

HOUSING DIFFICULTIES IN CAMBRIDGE

Housing is dear in Cambridge. Many people would say, wrongly, that it is dear anywhere, but it is a fact that the reaction of most purchasers is dismay at the high cost of accommodation. The exception is the occasional numbered Londoner prepared to accept a poor house because his standards are equated to the distorted values attached in London to position and convenience rather than quality. Also, from time to time an absent landlord engages an out-of-town agent to represent him in dealings over an unfit house. The imported attitude is often—'This would fetch £5000 in such-and-such a place'—ignoring the defects in the property. Sometimes a bad house is described as 'A house of character', but character is an uncommitted noun, it is the preceding adjective which determines whether it is bad or good.

The reasons for the lack of alternative housing are varied but simple. Given time and opportunity, supply and demand, guided by the local authority's use of its powers, will eventually even themselves out. Denied either of these factors the shortage of housing accommodation will remain and probably worsen.

Natural increase overtakes rate of housing progress. This goes without saying in an expanding population and must be provided for. At the same time other and allied factors appear: the lowering of the marriage age, the desire of couples for their own home, demand for single person accommodation and so on. None of these things is unimportant. For instance, arbitrary restrictions may be imposed by town planning. If a city has a ceiling population figure imposed upon it we instantly get into trouble.

It is decided say, that a city shall not exceed 100,000—a figure arrived at by esoteric planning methods lubricated with a large amount of pious hopefulness. Thereafter various factors exert influence, all of it restrictive in some degree or other. The boundaries of the city are, with small adjustments, defined and held. The pattern of employment, as regulated by existing industries, is congealed and new undertakings discouraged—this has an effect on the demand for industrial sites and consequent supply of

employment. All these factors are relevant and are reflected in the housing situation. A city becomes a magnet for the surrounding district, it is impossible to stop people coming into the city or children growing up to need homes for themselves.

These then are the effects: demand exceeds supply;—prices rise;—existing houses become crowded, with a proliferation of lettings and multiple occupation; facilities become overworked. There is opposition to clearance of unfit houses: the argument is that in a housing shortage nothing should be demolished—this creates the situation that as nothing is demolished in a built up area no sites are available for new houses so the stock of steadily deteriorating houses is held in the grip of an existing obsolete pattern.

Individual houses inevitably become unfit in time and must be dealt with. They have tiny sites, useless for redevelopment separately but circumscribed by the fierce tenacity of their neighbours who are forced by self-preservation to keep themselves in order. We have consequently a sprinkling of derelict houses and odd vacant sites, with the pattern frozen. As there are few houses to rent this means high rents—this enforces purchase for owner/occupation. Admittedly poor houses fetch inflated prices, persons of slender means buying houses not far removed from unfitness. Inexorably the enforcement of the Housing Acts brings more and more of these people face to face with closing, demolition or clearance orders. Consequent hardship is serious and opposition is deeply felt and sincere. The standards of fitness required by the Housing Acts is low—neither the absence of hot water nor a bath being reckoned as contributory to unfitness.

It is a sombre thought that in Cambridge we shall have a housing shortage until one good house offered to let at a reasonable rent stands empty for lack of a tenant.

SECTION 6. OTHER MATTERS OF ENVIRONMENTAL HYGIENE

REFUSE DISPOSAL

The disposal of refuse is effected by controlled tipping in disused marl pits in Coldham's Lane. The refuse is consolidated in layers and covered daily with hard material.

SEWERAGE AND SEWAGE DISPOSAL

The City is sewered mainly on the 'separate' system, the foul sewers discharging to either the main pumping station at Riverside or direct to the sewage treatment works at Milton. The surface water is kept separate and discharged to the river by a number of outfalls.

Foul sewage discharged to the Riverside Pumping Station is lifted to the works at Milton where it passes through a modern treatment plant comprising detritus tank, filter beds and humus tanks before being passed to the River Cam. A system of recirculation of effluent is adopted to effect maximum purification from the plant. The works have been designed to produce an effluent to conform with the 'Royal Commission' standard of the Ministry of Health which is required by the Great Ouse River Authority.

DRAINAGE WORK

When complaints about choked drains are received an employee of the Department visits with rods and plunger. If the obstruction can be removed easily he does it. This is a service to the general public and also to the clerical staff of the Department who are thereby spared much paper work.

Any jobs requiring excavations or equipment which this Department does not possess are dealt with either by the City Surveyor or the owner's contractors. Willingness to help on the part of the City Surveyor's staff makes this work easier than it might be and thanks are given.

228 drains involving 350 houses were dealt with by the Health Department staff. Where excavation is required the work is referred to the City Surveyor. A total of 52 sewers involving 180 houses were referred to him during 1968, the cost of work done amounting to £592 6s. 11d.

In 1967, 45 sewers involving 148 houses were referred to the City Surveyor at a cost of £269 11s. 6d.

DISINFESTATION

Arising out of inspections or complaints, 34 Council and 35 other premises were found to be infested with bed bugs, fleas, lice, cockroaches and other pests and were all treated. Where necessary, bedding and furnishings were disinfected or destroyed.

The department has continued to advise householders and tradespeople on how to rid their premises of insect pests and we have assisted the police

in dealing with verminous persons. The Corporation Tips in Coldham's Lane have been sprayed regularly during the summer months.

During 1968 there was the usual number of neglected old people to care for, usually men who have outlived their kith and kin. 6 men were disin-fested but it is not usually possible to keep this type clean and return visits are often necessary. There is a multiplicity of organisations prepared to help these people but they often do not want to be helped and compulsion is a distasteful business.

INSPECTION OF FACTORIES

The Council is responsible for enforcing parts of the Factory Act 1937 relating to sanitary accommodation for all factories.

Where there is no mechanical power in a factory, provisions on cleanliness, overcrowding, heating and ventilation are also administered by the Council. Routine visits are made by the Public Health Inspectors and a factory register has to be kept.

Lists of outworkers or persons who do work in their homes in con-nection with a factory must be regularly sent to the local authority.

There are 401 factories on the register.

182 visits were made to these factories during the year and 38 visits were made to building and engineering works. Notices regarding defects were served in 4 cases, other matters being dealt with informally.

The following tables, which are in the form required by the Minister of Labour, give particulars of the administration of the Acts in this area.

Inspections for the Purposes of Provisions as to Health

<i>Premises</i>	<i>Number on Register</i>	<i>Number of</i>		
		<i>Inspections</i>	<i>Written notices</i>	<i>Occupiers prosecuted</i>
Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	36	5	4	—
Factories not included in (i) in which Section 7 is enforced by the Local Authority	371	177	17	—
Other Premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises)	5	38	—	—
TOTAL ..	412	220	21	—

Cases in which Defects were Found

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	To H.M. Inspector	Referred By H.M. Inspector	
Want of cleanliness (S.1) ..	—	—	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6) ..	—	—	—	—	—
Sanitary Conveniences (S.7)					
Insufficient ..	—	1	—	—	—
Unsuitable or defective ..	—	18	—	—	—
Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork) ..	2	—	—	—	—
Total ..	2	19	—	—	—

Registered Factories

Factories on the Register (Section 8) at the end of the year .. 401

Other Matters

Matters notified to H.M. Inspector of Factories:

Class	Number
Failure to affix Abstract of the Factory and Workshops Act (S. 128)	—
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory Acts (S. 3)	—
Others	—

Notified by H.M. Inspector ..
 Reports of action sent to H.M. Inspector ..

Outworkers

(Factories Act, 1961, Sections 133 and 134)

Nature of Work	Section 133			Section 134		
	No. of out-workers in August list required by Section 133(1) (c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions
Wearing apparel { Making etc., Cleaning and Washing	74	-	-	-	-	-
Household linen	-	-	-	-	-	-
Lace, lace curtains and nets	-	-	-	-	-	-
Curtains and furniture hangings	6	-	-	-	-	-
Furniture and upholstery	5	-	-	-	-	-
Electro-plate	-	-	-	-	-	-
File making	-	-	-	-	-	-
Brass and brass articles	-	-	-	-	-	-
Fur pulling	-	-	-	-	-	-
Iron and steel cables and chains	-	-	-	-	-	-
Iron and Steel anchors and grapnels	-	-	-	-	-	-
Cart gear	-	-	-	-	-	-
Locks, latches and keys	-	-	-	-	-	-
Umbrellas, etc.	-	-	-	-	-	-
Artificial flowers	-	-	-	-	-	-
Nets, other than wire nets	-	-	-	-	-	-
Tents	-	-	-	-	-	-
Sacks	-	-	-	-	-	-
Racquet and tennis balls	-	-	-	-	-	-
Paper bags	-	-	-	-	-	-
The making of boxes or other receptacles or parts thereof made wholly or partially of paper	-	-	-	-	-	-
Brush making	-	-	-	-	-	-
Pea picking	-	-	-	-	-	-
Feather sorting	-	-	-	-	-	-
Carding, etc., of buttons etc.	-	-	-	-	-	-
Stuffed toys	-	-	-	-	-	-
Basket making	-	-	-	-	-	-
Chocolates and sweetmeats	-	-	-	-	-	-
Cosques, Christmas stockings, etc.	-	-	-	-	-	-
Textile weaving	-	-	-	-	-	-
Lampshades	-	-	-	-	-	-
TOTAL	85	-	-	-	-	-

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

Number of Registered Premises

Offices	680
Shops	730
Warehouses	56
Catering	120
Fuel Storage	4
Total	1590

Contraventions and Enforcement During the year 261 premises were given a general inspection. 80 notices were served itemising 232 contraventions. Again a high percentage of these were of a minor nature such as absence of abstracts and thermometers.

It has not been necessary to institute legal proceedings or to grant a formal exemption.

Analysis of Defects

<i>Section</i>	<i>Subject</i>	<i>No.</i>
4	Cleanliness	14
5	Overcrowding	1
6	Temperature	32
7	Ventilation	9
8	Lighting	9
9	Sanitary accommodation	30
10	Washing facilities	20
11	Drinking water	—
12	Clothing accommodation	4
13	Sitting facilities	2
14	Seats for sedentary workers	1
15	Eating facilities (shops only)	2
16	Floors, passages and stairs	33
17	Exposed machinery	9
24	First aid equipment	30
50	Display of abstract	36
Total		232

Accidents It is a requirement of the Offices, Shops and Railway Premises Act, 1963 that all accidents which occur to persons employed at premises to which this Act applies must be notified to the local authority.

Nineteen accidents were officially notified during the year. In each case an investigation was carried out.

Three quarters of the accidents occurred in retail shops. Out of the total of 19 accidents, four could have been caused by faults on staircases, although in no case was it possible to ascribe the accident to a specific defect

with any certainty. However, in each case remedial action was recommended.

In most cases the accidents appear to have been caused either by carelessness or by the person carrying out some job which they should not have been doing, for example:

1. A shop assistant attempting to move a large display counter by herself instead of enlisting the help of the store's maintenance workmen.
2. A shop assistant walking downstairs with her arms piled high with boxes thus preventing her from seeing where she was going.

It was encouraging to note that there were fewer accidents in butchers' shops and food preparation premises.

COMMON LODGING HOUSES

There are two registered common lodging houses in the City. Both are operated by professional organisations skilled in the work and no complaints were received as to their management.

The Church Army Hostel in Willow Walk is a comparatively modern building with thirty-four beds. There is a resident Captain who works closely with the Department.

The White Ribbon Hotel in East Road is a hostel, operated by the Salvation Army, with forty-three beds. This hostel is quite outdated and always full, sometimes uncomfortably so. The Salvation Army Officers in charge do their best in very trying circumstances and basically they succeed. The place is clean and well kept: meals are cheap and wholesome. Nevertheless the need for a replacement for this hostel becomes ever greater. Negotiations between the City Council and the Salvation Army have not progressed because of the financial gap between the cost of a new building and the rent the Salvation Army can offer. If we are to have this essential service, which the Salvation Army is willing to provide, some way must be found of bridging this gap.

The hostel facilities offered by a new building would pay for themselves in more ways than the financial arrangement could cover. A burden of single men would be taken from the Housing List, much hidden squalor of single private rooms would be relieved, the disgraceful problem of those 'sleeping rough' would be, at least, mitigated.

Cambridge needs a new common lodging house and it should be regarded as an essential service in the housing structure and not as a luxury which must necessarily pay for itself.

The term common lodging house, unfortunately perpetuated in current public health legislation, has overtones suggesting a refuge from the squalid conditions of the gutters which, in the nineteenth century, were the only alternatives. Anything was an improvement, even the conception of the doss-house which, to people today, the common lodging house conjures up. Not one in a thousand has ever been inside one.

For many years past the standard of common lodging house accommodation has been rising, at one end of the scale by the demolition of the worst and at the other by the improvement of the best, together with some new building. Most of the inmates have risen accordingly but some have been left behind and fallen into the void below the common lodging house, sometime, although inadequately, filled by the now abolished casual ward

—the 'spike'. These people, almost all men, live at dregs level. They wander, beg, booze: they sleep where they can: they progress steadily via the meths. bottle to a squalid and degraded existence: they die as they live, unwanted and unlamented.

Taking a cold view of these unfortunates, they are a nuisance. Normal penal methods, which are the reactions of a revolted society, have no effect. These people live in a hiatus within the law and are a cross borne by the community.

The burden of these people has been shouldered by the Simon Community, a group dedicated to serving them by providing the rudimentary facilities without which no attempt at redemption can be made. The Simon Community in this work is, in fact, serving the general public by undertaking responsibility which is rightly that of the public and it is only by efforts such as they make can we hope to alleviate a dreadful social problem.

RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951

There are three premises registered under this Act. All were inspected during the year and found to be in a satisfactory condition.

DISEASES OF ANIMALS (WASTE FOODS) ORDER, 1957

This order places on local authorities the responsibility of inspecting and licensing waste food boiling plants. Every collector of waste foods must boil the material in a licensed plant before feeding it or redistributing it for feeding purposes. Collectors having not more than four weaned pigs or 50 head of poultry who boil waste foods for feeding on their premises to their own stock, do not need to have licences.

Twenty-seven waste food boiling plants have been inspected and licensed.

RODENT CONTROL

1968 proved exceptionally busy for the rodent control staff. Over 4,300 visits were made to a total of 765 complaints and 1,075 surveys. No outstanding events occurred in the year but with the advent of mouse poisons containing Chloralose at least one problem is overcome more easily. This is now available to the public. But perhaps what is needed is not a more potent poison but a more responsible attitude from the general public concerning the throwing out of waste food which is a principal contributory factor in domestic infestations.

ANIMAL BOARDING ESTABLISHMENTS ACT 1963

There are two premises registered under this Act, both of these were inspected during the year and found to be well run.

RIDING ESTABLISHMENTS ACT, 1964

Two premises are registered under this Act. Both of these have been inspected and found to be satisfactory. The Riding School at Mill End Road, Cherryhinton has only a monthly lease and the owner is at present looking for new premises.

CARAVANS

There are three licensed caravan sites in the City. Two possess permanent planning permission and are situated at Fulbourn Road, Cherryhinton and at Fen Road, Chesterton.

The site at Fulbourn Road complies with public health requirements and is well maintained.

The other site at Fen Road requires constant supervision to keep it up to the requirements of the site licence. Although flush toilets and washing facilities have been provided on the site during the year these were misused and broken on several occasions.

Sydney Farm, Mill End Road, Cherryhinton is a pleasant site but some essential facilities have been lacking because planning permission has previously been granted only on a yearly basis. At the end of the year planning permission was granted for five years and new conditions have been written into the site licence. It is hoped by next year that all 24 caravans will have mains water supply, drainage for waste water and electricity in all toilets.

NOISE

A significant advance in noise control has been achieved by the design of a muffler for pneumatic drills. Whilst reducing the noise considerably it does not impair the efficiency of the drill. Previous objections to its use have thus been overcome. Users of these drills have co-operated most readily and the results have pleased both the public and the operators.

The number of complaints received were more than double that in the previous year. Besides complaints about unmuffled drills nuisance has been caused by music from licensed premises, extract fans and dogs.

In all but one case, the offenders have willingly taken steps to abate the nuisances without the need for legal action.

Part IV

WELFARE SERVICES

HEALTH VISITING

The full establishment of 17 Health Visiting Stations. The number of visits made by the Health Visitors is shown in the following table. The Health Visitors are also engaged in a variety of other work, such as the provision of first aid, and the giving of advice on matters of domestic hygiene.

SECTION 1. GENERAL WELFARE SERVICES

HOME HELPS

The following table summarises the work which was done during the year.

<i>No. of cases receiving help at beginning of period</i> (1)	<i>No. of new cases during period</i> (2)	<i>No. of cases terminated during period</i> (3)	<i>No. of cases remaining at end of period</i> (4)	
554	423	415	562	
<i>No. of persons receiving help during period</i> (5)	<i>No. of Home Helps employed</i> (6)		<i>No. of hours actually worked</i> (7)	<i>No. of cases investigated but no help given</i> (8)
	<i>full time</i>	<i>part time</i>		
977	36	110	111556	219

No. of patients on full rate 164

No. of patients on assessment 813

Total income £10,381. 3s. 7d.

Neighbourly Help In addition to the ordinary Home Help Service, we are able to arrange, from time to time, for neighbours to give help to old people living alone, especially in the evenings and at weekends.

HEALTH VISITING

The full establishment is 17 Health Visitor/School Nurses. The number of visits paid by the Health Visitors is shown in the following table. The Health Visitors are also School Nurses and therefore only a part of their time is given to Health Visiting.

First visits to infants born in 1968	1451
Subsequent visits to infants	4248
Visits to children born in 1967	3058
Visits to children born in 1963/66	3944
Visits to expectant mothers	233
Visits re care of the aged	2746
Visits to cases of tuberculosis	24
Visits on behalf of Addenbrooke's Hospital to homes of patients before or after admission	62
Visits to other cases	1801
*Fruitless visits	3503
	<hr/>
	21070 (1967—20034)

The Health Visitors, as the general social workers of the department, give a good deal of time to problem families and deal with many problems which are far removed from the merely medical or nursing spheres. They also follow up patients discharged from regional hospitals as requested, particularly those from the geriatric unit at Chesterton Hospital. They work in attachment to general medical practitioners.

HOME NURSING

The establishment is 16 full-time nurses but, usually, several part-time nurses have to be employed to make up the equivalent of this number. The work done throughout the year is summarized as follows:

The number of cases on the books at 1/1/68	401
New cases in 1968	1478
	<hr/>
	1879 (1967—1765)
No. of Visits paid: Medical	29973
Surgical	10767
Infectious Diseases	—
Tuberculosis	42
Maternal Complications	74
	<hr/>
	40856 (1967—37518)

* Calls at houses where no one was at home or where, for some other reason the object of the visit could not be attained.

SECTION 2. MATERNAL AND CHILD WELFARE

MATERNITY AND MIDWIFERY

Family Planning As from April 1968, the family planning services provided in the City were augmented in order to implement the provisions of the National Health Service (Family Planning) Act 1967. As a result of co-operation between the City Council, the County Council, Cambridge Women's Welfare Association, the Board of Governors of the United Cambridge Hospitals, and the Cambridge Advisory Centre for Young People, the following family planning services are now available:

- (a) Twice weekly sessions at Auckland Road Clinic;
- (b) A weekly session at the outpatient department of the Maternity Hospital;
- (c) A domiciliary service for women who are unable, for domestic reasons, to attend clinics;
- (d) An advisory clinic for young people (by appointment);
- (e) Special clinics for women requiring the Intra-Uterine Device (by appointment).

Patients are referred to these services mostly by general practitioners, health visitors, and other social agencies.

Midwives The Non-Medical Supervisor of Midwives is Miss M. Livesey, S.R.N., S.C.M., H.V.Cert (Queen's Nurse), the Superintendent Nursing Officer.

Thirteen midwives gave notification of intention to practise in the City during the year. (3 left during the year).

In addition to domiciliary and private midwives, 63 midwives notified institutional practise from the Maternity Hospital (25 of these left the district during the year), and 10 from the Evelyn Nursing Home (6 of these left during the year).

Municipal Midwifery Service There was an establishment of 12 full-time midwives at the end of the year. 425 cases were attended (1967-441). These cases accounted for 33 per cent of the births of Cambridge residents. Part-time help with midwifery day-time visits was available when needed.

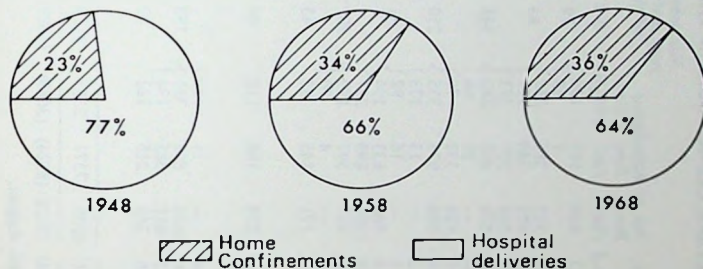
The number of visits paid to midwifery cases was 8,864. The number of ante-natal visits was 6,602.

Gas and Air Analgesia was administered by the midwives in 40 cases; Trilene in 195 cases.

Relaxation Exercise classes are Clinics conducted by the municipal midwives. 20 courses (1967-12) were held consisting of 5 classes each, and 9-11 expectant mothers were accommodated in each class. 729 attendances were made during the year. In 1967, 845 attendances were made.

Births The number of births in Cambridge notified during the year to parents who normally reside in the City is as follows:

	1968	1967
Notified from Nursing Homes	61 (4.7%)	85 (6.4%)
Notified from Maternity Hospital	799 (62.3%)	807 (60.7%)
Notified from patient's own home	423 (33.0%)	438 (32.9%)
	1283	1330



INFANT WELFARE

Premature Births The number of live premature births (*i.e.*, birth weight 5 lbs. 8 ozs. or less) in the cases of City residents during 1968 was 71, and the survivals at the end of one month were:

	Year of Birth		Survived at end of One Month	
	1968	1967	1968	1967
Born at Home ..	10	7	9	7
Born in Hospital ..	60	60	56	52
Born in Nursing Home	1	2	1	2
	71	69	66	61

Special attention is given to this group of infants by the Health Visitors.

Infant Welfare Clinics Thirteen infant welfare sessions were held weekly and two fortnightly in the City at ten centres. Toddler sessions, for children of 18 months to 5 years, who attended by appointment were held at six centres: Romsey, Cherry Hinton, Auckland Road, East Barnwell, Chesterton and Kingsway.

The usual activities of weighing babies, giving advice to the mothers, and selling foods were carried on at all the centres. Proprietary brands of dried milk were sold at cost price. Accessory food substances, *e.g.*, Virol, Marmite and Vitamin Tablets were also obtainable.

In addition, the centres functioned as depots for the distribution of National Dried Milk, Cod Liver Oil, Vitamin Capsules and Orange Juice for expectant mothers and children.

ATTENDANCES AT MATERNITY AND CHILD WELFARE CLINICS DURING THE YEAR 1968

Clinic	Day and Time Held			No. of Sessions held in the Year	Nos. who attended in the year, and who, at the end of the year were:					Doctors Consultations					
					New Cases			No. of Attendances							
					0-1	1-5	1968	1967	1966/63		0-1	1-2	2-5		
Auckland Road	I.W.C.	Tuesday	p.m.	49	95	13	610	515	139	}	79	60	64	284	
Auckland Road	Todd.	Friday	p.m.	10	—	1	—	1	85		86				
Castle Street	I.W.C.	Tuesday	a.m.	49	54	4	313	216	218		214				
Castle Street	I.W.C.	Tuesday	p.m.	49	51	12	435	340	177	}	85	76	85	254	
Cherryhinton	I.W.C.	Monday	p.m.	49	71	11	569	527	273		328				
Cherryhinton	I.W.C.	Thursday	p.m.	48	93	8	578	443	282		293				
Cherryhinton	Todd.	Friday	a.m.	8	—	—	—	29	68	}	145	145	195	97	
Chesterton	I.W.C.	Thursday	a.m.	48	65	2	529	332	78		—				
Chesterton	I.W.C.	Thursday	p.m.	48	144	6	786	978	355		704				
Chesterton	Todd.	Friday	p.m.	12	—	2	—	13	173	}	210	162	202	185	
East Barnwell	Todd.	Monday	p.m.	11	—	1	—	16	92		108				
East Barnwell	I.W.C.	Thursday	p.m.	47	88	8	566	633	194		284				
Kingsway	I.W.C.	Monday	p.m.	49	159	9	1107	899	237	}	71	80	103	170	
Kingsway	I.W.C.	Tuesday	a.m.	49	75	12	547	597	199		601				
Kingsway	Todd.	Monday	a.m.	7	—	7	—	4	70		74				
Newnham	I.W.C.	2nd & 4th Wednesday in the month	p.m.	23	41	8	171	145	87	}	207	190	197	106	
*Norwich Street	I.W.C.	Wednesday	a.m.	30	52	6	254	186	112	}	44	27	35	217	
Romsey	Todd.	Monday	p.m.	11	—	4	—	11	139	}	193	162	197	150	
Romsey	I.W.C.	Wednesday	p.m.	48	153	16	1086	892	331		631				
Romsey	I.W.C.	Thursday	a.m.	48	64	5	411	385	134		180				
Trumpington	I.W.C.	1st & 3rd Monday in the Month	p.m.	21	50	16	243	215	122	}	52	39	40	283	
					714	1255	151	8205	7377	3565	1129	969	1134	5249	
					(1967)	(730)	(1260)	(154)	(9121)	(8524)	(3689)	(1089)	(1066)	(1305)	(5770)
*This clinic returned to month															

*This clinic returned to weekly sessions from twice monthly ones on 28th August.



The Playground of Sedley Day Nursery

Test Feeds During the year infant weighing machines were lent out 41 times (1967—44) to mothers, to enable them to carry out 24-hour test feeds at home.

Phenylketonuria Some children are born with a disorder of metabolism which quickly leads to irreversible brain damage so that they become severely subnormal mentally. Although the incidence of this state is only about 1 in 20,000 the recent introduction of a simple urine test to reveal the condition makes it worth while carrying out as a routine for, if discovered shortly after birth, suitable dietetic treatment usually prevents brain damage and enables the child to grow up mentally normal. The health visitors are now testing the urine of all babies for phenylpyruvic acid at two weeks and again at six weeks. So far we have not discovered a case of this abnormality but this, of course, is a very welcome discovery.

Congenital dislocation of the hip This condition, if not corrected early in life, leads to a serious abnormality in walking or necessitates the alternative of an operation and more or less lengthy period in a plaster cast. All our midwives have received instruction in early testing for congenital dislocation of the hip and they examine every child whom they deliver at the age of three days.

NURSERIES

Sedley Day Nursery This Nursery takes 40 children 0 to 5 years full-time, and 3 part-time. The Nursery is in the charge of a Matron (S.R.N.) with a Deputy Matron and Warden, 3 Nursery Nurses and 1 Nursery assistant. It is open Monday to Friday from 8.30 a.m. to 5.30 p.m.

A Medical Officer visits the Nursery periodically and conducts a full medical inspection of each child. During the year the Medical Officer paid 7 visits to the Nursery and 178 inspections were carried out.

The Nursery is accepted by the Department of Education and Science and the Ministry of Health as a Training Centre for the training in practical work of a number of students who are taking the Nursery Nurses' Course at the Technical College. As a rule four students are under training at the Nursery.

The attendances during the year were as follows:

	Capacity		Average Attendance		No. on Waiting List	No. of Attendances	
	F.T.	P.T.	F.T.	P.T.		F.T.	P.T.
Age 0 to 2 ..	14	—	11	—	28	2585	—
Age 2 to 5 ..	26	3	25	2	68	6092	469

(F.T.=Full-time P.T.=Part-time)

Register of Private Nurseries and Daily Minders At the end of the year there were 15 registered private Nurseries accommodating 401 children in all, and 15 daily minders, minding 160 children.

MATERNITY AND CHILD WELFARE DENTAL SCHEME

The following table shows the treatment provided for expectant and nursing mothers and young children during the year.

	Children 0-5	Expectant and Nursing Mothers
First Visit	239	22
Subsequent Visits	279	39
Total Visits	518	61
Number of Additional Courses or Treatment other than the first course commenced during the year ..	14	—
Treatment provided during the Year:		
Number of Fillings	371	30
Teeth Filled	306	30
Teeth Extracted	44	34
General Anaesthetics given	10	1
Emergency Visits by Patients	20	11
Patients X-Rayed	3	—
Patients Treated by Scaling and/or Removal of Stains from the teeth (Prophylaxis)	51	3
Teeth otherwise Conserved	76	—
Teeth Root Filled	—	1
Inlays	—	—
Crowns	—	—
Number of Courses of Treatment Completed during the Year.. ..	141	16
Patients Supplied with Dentures	—	1
General Anaesthetics Administered by Dental Officers	—	—
Number of Patients given First Inspections	118	16
Number of Patients who required Treatment	95	15
Number of Patients who were Offered Treatment	93	15

OTHER INFANT WELFARE SERVICES

Illegitimate Children A grant of £300 a year was paid to the Cambridge-shire Association for Social Welfare in virtue of their work among mothers of illegitimate children.

Child Life Protection The work of supervision of children 0 to 15 years old, boarded out for gain, is the responsibility of the Children's Committee under the Children Act, but the City Health Visitors continue to inspect and report quarterly to the Children's Officer on those foster-children who are under 5 years of age.

The number of foster-children on the register at the end of 1968 was 39 (1967—43), and the number of foster-mothers was 33 (1967—31).

Speech Therapy 7 Children were referred for speech therapy in 1968 (1967—11).

Routine Medical Inspections at Nursery Schools During the year an Assistant Medical Officer carried out a number of routine medical inspections of children under five attending Nursery Schools. Numbers inspected were 230 (1967—312).

Handicapped Children Under 5 Children born with a defect are notified by the Maternity Hospital or the domiciliary midwife. Such children are recorded in our 'At Risk' register and every effort is made to have the defect remedied or appropriate supervision and suitable treatment provided. At the end of 1968 our register contained the names of 34 mentally handicapped children and 47 physically handicapped.

SECTION 3. THE SCHOOL HEALTH SERVICE

GENERAL STATISTICS FOR 1968

Number of Schools:

Primary	25
Secondary Grammar	4
Secondary Modern	5
Special	2
Nursery	4

Number of Departments:

Nursery	4
Primary	42
Secondary Grammar	4
Secondary Modern	8
Special	2

Number of children on registers at the beginning of the year

1959	1960	1961	1962	1963	1964	1965	1966	1967	1968
13187	13287	13260	13131	13402	13699	13877	13990	13998	14138

Average number of children in attendance

1959	1960	1961	1962	1963	1964	1965	1966	1967	1968
12225	11296	11681	12044	12222	12302	12471	12871	12229	13331

SCHOOL MEDICAL INSPECTION

The usual arrangements for routine medical inspections in this country provide for an examination shortly after a child enters school, another at the age of ten and a final one as a 'leaver'. In Cambridge children are examined at three-yearly intervals, so that the full range of routine medical inspection is:

1. At nursery school (every term)
2. At primary school as entrants (in the 6th year)
3. At primary school in the 9th year
4. At secondary school in the 12th year
5. At secondary school as leavers (in the 15th year)
6. At grammar school if remaining beyond the statutory leaving age (17 or 18).

The full examination in the 9th year was adopted experimentally some years ago. It has not proved justifiable and so we have reverted to an examination of the eyes only at this age.

**Part I.—Medical Inspection of Pupils attending Maintained and Assisted
Primary and Secondary Schools (including Nursery and Special Schools)**

Table A.—Periodic Medical Inspections

Age Groups inspected (By year of Birth)	No. of Pupils who have received a full medical examination	Physical condition of pupils inspected		No. of Pupils found not to warrant a medical examination (See Note 1 above)	Pupils found to require treatment (excluding dental diseases and infestation with vermin)		
		Satisfactory	Unsatisfactory		for defective vision (excluding squint)	for any other condition recorded at Part II	Total individual pupils
		No.	No.				
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1964 and later	325	325	—	—	2	14	15
1963	627	625	2	—	7	78	78
1962	444	443	1	—	6	45	49
1961	—	—	—	—	—	—	—
1960	—	—	—	—	—	—	—
1959	—	—	—	—	—	—	—
1958	1007	1001	6	—	46	86	126
1957	37	37	—	—	3	6	9
1956	2	2	—	1	—	—	—
1955	11	11	—	—	—	—	—
1954	864	856	8	—	43	52	92
1953 and earlier	350	348	2	—	17	16	33
Total	3667	3648	19	1	124	292	402

Col. (3) total as a per-
centage of Col. (2)
total 99.48

Col. (4) total as a per-
centage of Col. (2)
total 00.51 } to two places
of decimals

Table B.—Other Inspections

Number of Special Inspections	..	..	..	..	893
Number of Re-inspections	..	....	..	..	1708
				Total	2601

Table C.—Infestation with Vermin

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	11391
(b) Total number of individual pupils found to be infested	46
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	2
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	—

Part II.—Defects found by Periodic and Special Medical Inspection during the Year

Defect Code No. (1)	Defect or Disease (2)		Periodic Inspections				Special Insp'ns (7)
			Entrants (3)	Leavers (4)	Others (5)	Total (6)	
4	Skin	T O	31 —	15 —	12 1	58 1	6 1
5	Eyes: (a) Vision	T O	74 15	99 60	75 49	248 124	59 97
	(b) Squint	T O	26 8	5 —	6 —	37 8	5 3
	(c) Other	T O	7 —	3 —	8 —	18 —	2 —
6	Ears (a) Hearing	T O	36 24	6 6	8 17	50 47	6 32
	(b) Otitis Media	T O	33 —	3 —	1 —	37 —	2 —
	(c) Other	T O	14 1	2 —	9 —	25 —	— —
7	Nose and Throat	T O	205 —	17 —	16 —	238 —	24 —
8	Speech	T O	43 26	4 4	6 6	53 36	6 17
9	Lymphatic Glands	T O	143 —	4 —	7 —	154 —	15 —
10	Heart	T O	23 1	5 —	2 —	30 1	5 1
11	Lungs	T O	42 2	10 1	10 4	62 7	5 3
12	Developmental (a) Hernia	T O	2 —	— —	1 —	3 —	2 —
	(b) Other	T O	10 —	— —	3 —	13 —	— 1
13	Orthopaedic (a) Posture	T O	5 4	13 21	8 22	26 47	4 13
	(b) Feet	T O	57 56	13 30	14 37	84 123	15 54
	(c) Other	T O	18 7	3 5	4 1	25 13	3 1
14	Nervous System (a) Epilepsy ..	T O	1 —	1 —	1 —	3 —	— —
	(b) Other	T O	— —	1 —	— —	1 —	4 —
15	Psychological (a) Development ..	T O	24 3	2 —	8 1	34 4	2 —
	(b) Stability	T O	96 —	16 —	36 3	148 3	18 2
16	Abdomen	T O	9 —	4 —	6 —	19 —	5 —
17	Other	T O	28 —	38 1	34 —	100 1	13 —

SUPERVISION AND TREATMENT

School Clinics

There are two sessions each week at Romsey and Auckland Road Clinics and one each at Cherry Hinton Hall and Kingsway. Attendances at the clinics were as follows:

Auckland Road	..	..	..	122
Romsey	..	..	..	299
Cherryhinton Hall	..	..	..	99
Kingsway	..	..	..	64

Part III. Treatment Tables

Table A. Eye Diseases, Defective Vision and Squint

	<i>Number of cases known to have been dealt with</i>
External and other, excluding errors of refraction and squint	—
Errors of refraction (including squint)	1016
Total	1016
Number of pupils for whom spectacles were prescribed	553

Table B. Diseases and Defects of the Ear, Nose and Throat

	<i>Number of cases known to have been dealt with</i>
Received operative treatment:	
(a) for diseases of the ear	31
(b) for adenoids and chronic tonsillitis	133
(c) for other nose and throat conditions	8
Received other forms of treatment ..	2
Total	174
Total number of pupils in schools who are known to have been provided with hearing aids:	
(a) in 1968	2
(b) in previous years	21

Table C. Orthopaedic and Postural Defects

	<i>Number of cases known to have been treated</i>
(a) Pupils treated at clinics or out-patients departments ..	25
(b) Pupils treated at school for postural defects	128
Total	153

Table D. Diseases of the skin
(excluding uncleanliness, for which see Table C of Part I)

	<i>Number of cases known to have been treated</i>
Ring-worm-(i) Scalp	—
(ii) Body	—
Scabies	35
Impetigo	13
Other skin diseases	—
Total	48

Table E. Child Guidance Treatment

	<i>Number of cases known to have been treated</i>
Number of pupils treated at Child Guidance Clinics	204

Table F. Speech Therapy

	<i>Number of cases known to have been treated</i>
Number of pupils treated by Speech Therapists	280

Table G. Other Treatment Given

	<i>Number of cases known to have been treated</i>
(a) Pupils with minor ailments ..	173
(b) Pupils who received convalescent treatment under School Health Service arrangements	—
(c) Pupils who received B.C.G. vaccination	1343
(d) Other than (a), (b) and (c) above (specify)	—
(e) In-patients Addenbrooke's ..	124
Total (a)–(e) ..	1640

Mentally Subnormal Children

No. of children reported to the Local Health Authority during 1968:
Under Section 57 (4) of the Education Act —

WORK OF THE SCHOOL NURSES

There is an establishment for 18 School Nurses, 17 of whom are Health Visitors and so only a part of their time is given to school work. The eighteenth nurse works full time at the Roger Ascham School.

The nurses' work is shown in the following table:

Attendances at schools

Routine medical inspections	343
Personal hygiene inspections	108
Other school visits	286
Immunisation sessions	5

Attendances at clinics 308

Home Visits 369

Eye Clinics 65

SPECIAL PROVISIONS

The Roger Ascham School This is a special school of 120 places catering for children who, for physical or other reasons, do not fit into the ordinary school system. It is situated in Ascham Road off Milton Road. The classrooms are all separate blocks spaced out in a pleasant garden and open grounds. Children from 5 to 16 years are admitted for periods varying with their needs; but the policy is, wherever possible, to give intensive treatment so that they may return to an ordinary school as soon as possible. Separate cloakroom and toilet facilities have now been provided for each classroom.

All children stay for lunch. Lessons are taken out of doors whenever possible, and emphasis is laid on other outdoor activities like games, dancing and swimming.

A medical officer attends for two sessions each week. A nurse is in attendance each morning. There are two full time physiotherapists and one half time physiotherapist who treat the children as required. The orthopaedic specialist and the paediatrician of Addenbrooke's Hospital visit the school.

Special transport is provided. There is no serious waiting list.

Cerebral Palsy Unit A special unit for the treatment and education of children suffering from cerebral palsy forms part of the Roger Ascham School. Three physiotherapists treat the children for whom there are two special classes: one for children under seven and the other for children above that age. Paediatric and orthopaedic consultants visit the unit regularly. About 17 children are usually under treatment at any one time, some being in the general classes of the school.

A detailed written record is kept of each child's command of posture and bodily movements and the changes which take place during treatment. In addition, cinematograph films are taken at intervals and these form a valuable record from which results may be assessed.

Diagnostic Unit This unit, also at the Roger Ascham School, is for diagnosing the needs of any child who seems likely to require special educational treatment. It functions with a maximum of 10 children. These are children who appear to be somewhat mentally retarded and are admitted to the diagnostic unit at just under 5 years old with a view to determining whether they are going to prove suitable for ordinary school, Educationally Sub-Normal School or Training Centre.

They stay for a minimum of 6 months and a maximum of 2 years. The unit is in the charge, under the Headmistress, of a teacher with considerable experience in the work of a diagnostic unit.

All children are seen with their parents before admission by a panel consisting of the School Medical Officer, the Educational Psychologist, the Headmistress and the teacher of the unit; and each child is reviewed every six months by the same panel in the presence of the parents.

The Lady Adrian School This school, situated in Courtney Way is for educationally sub-normal children. It has accommodation for 130. 50 places are reserved for children from the County area outside the City.

The age range is from 7 to 16, and intelligence quotients range from

about 48% to about 80% of average. This quotient is, of course, only a guide to admission, and other factors are taken into consideration when the assessment is made. These children, who would inevitably lose their confidence by working with children of superior ability in big classes, are helped to develop to the best of their potentiality by working to their own pace in small groups where friendly relations are easier to establish. Almost all the children are subsequently able to take their place in the community, and suitable employment is found for them before they leave the school.

Drama, painting, dancing, handicraft and cooking as means of self-expression play an important part in the life of the school and help to develop the children's ability to enjoy comradeship and group spirit. Visits in the city and further afield stimulate their interest and broaden their outlook.

The greatest benefit is derived if children can be admitted before secondary school age.

Special transport is provided and a physiotherapist attends the school.

Remedial Exercises The work of the Peripatetic Physiotherapist and the Remedial Gymnast is set out below.

School departments visited	..	..	42
Children treated:			
Asthma .. .. .	..	..	33
Foot defects .. .. .	..	..	344
Postural defects .. .. .	..	..	128
Breathing exercises .. .. .	..	..	4
Cerebral Palsy .. .. .	..	..	6
Poliomyelitis .. .. .	..	..	1
			<hr/> 516 <hr/>

At the Roger Ascham School 62 children were treated.

Spastics .. .. .	..	..	28
Breathing exercises .. .. .	..	..	13
General Physiotherapy .. .. .	..	..	14
Postural Drainage .. .. .	..	..	—
Out-patient Spastics .. .. .	..	..	7

Speech Therapy We share 5 Speech Therapists with the School Health Service of the County Council, but for most of the year we did not have a full complement. Treatment is given at Kingsway, Cherry Hinton Hall, Romsey and Auckland Road clinics, at the Roger Ascham School and at some of the larger schools on the outskirts of the city. 280 children were treated during the year.

Audiometry An audiometrician visits the schools and sweep-tests all of the seven-year-old children and all children specially referred as possibly having impaired hearing. Those who fail are retested after a month. Failures of the second tests are referred, for further examination and treatment, to General Practitioners in cases of minor degrees of deafness, or to the Ear, Nose and Throat Specialist at the Hospital where gross hearing loss is present.

The numbers tested were:

Seven-year-olds	1028
Special	116
The number of Re-tests were	222
The number who failed Re-tests	76
The number referred to Hospital	135

Partially Hearing Children Children with impaired hearing receive special attention in a group at Homerton Nursery School and there are two special classes at other schools. The class at Sedley School is for children in the nursery and infant range. The class at Mayfield School is for older children. Twice a month, there is a special audiology clinic at Addenbrooke's Hospital for schoolchildren from the City and County.

Handicapped Pupils In addition to the special provisions so far described we have access to the Child Psychiatric Service of the Regional Hospital Board and to the services of various departments of the United Cambridge Hospitals. If we cannot provide suitable facilities for a handicapped child locally we endeavour to place him in a suitable residential school. The following table shows the number of children so placed.

Category	Number on Registers of Residential Special Schools at end of year
Blind	4
Deaf	8
Physically Handicapped	3
Educationally sub-normal	9
Maladjusted	4

SCHOOL DENTAL SERVICE

Report of the Principal School Dental Officer, J. R. Toller, M.Sc.D., L.D.S.

Attendances and Treatment

First visit	4328
Subsequent visits	6757
Total visits	11085
Additional courses of treatment	445
Fillings in permanent teeth	5652
Fillings in deciduous teeth	2944
Permanent teeth filled	4761
Deciduous teeth filled	2639
Permanent teeth extracted	603
Deciduous teeth extracted	2017
General anaesthetics	462
Emergencies	438
No. of pupils X-rayed	453
Prophylaxis	781
Teeth otherwise conserved	257
No. of teeth root filled	14
Inlays	2
Crowns	3
Courses of treatment completed	2306

Orthodontics

Cases remaining from the previous year	195
New cases commenced	125
Cases completed	38
Cases discontinued	5
No. of removable appliances fitted	190
No. of fixed appliances	2
Pupils ref. to hospital consultant	—

<i>Dentures supplied</i>	6
----------------------------------	---

<i>Inspections</i> at school 1st	3961
Inspections at clinic 1st	293
No. requiring treatment	2620
No. offered treatment	2595
Pupils re-inspected	1443
No. requiring treatment	1138

2338 sessions devoted to treatment
34 sessions devoted to inspections
2 sessions devoted to dental health

SCHOOL MEALS AND MILK

During 1968, 1,733,511 school meals were served: 138,834 to staff and 1,594,677 to children. 189,931 of the children's meals were free.

Milk was supplied in $\frac{1}{2}$ pint bottles. 1,680,170 bottles went to maintained schools and 241,247 to non-maintained schools.

MISCELLANEOUS

Examination of Teachers During the year 180 candidates were examined prior to entering colleges for training as teachers.

Juvenile Employment 355 children were examined, during the year, to determine their fitness for employment.

Educational Psychologist The Authority's Educational Psychologist gave half his time to work in the City. He advises teachers upon problems of educational retardation and emotional disturbances. He also carries out assessments of intelligence and remedial teaching in reading.

SECTION 4. OTHER WELFARE SERVICES

WELFARE OF OLD PEOPLE

General The Health Visitors include care of the elderly in their normal duties and we maintain liaison with voluntary bodies such as The Cambridgeshire and Isle of Ely Old People's Welfare Council, to which the City Council makes an annual grant. Regular meetings are held of those principally concerned with the welfare of old people in the City and the County, and Meals on Wheels are provided by the W.V.S.

Persons in need of care and attention Section 47 of the National Assistance Act, 1948, provides for legal action to be taken by the Council in certain circumstances where it appears that persons in need of care and attention should be removed to more suitable premises. No such case arose in 1968.

Incontinence Pads Incontinence pads are supplied to all persons in need, the number being approximately 1000 a month. Hospital type plastic bags for soiled pads are supplied by the department, and with the contents are either burned by the householders or taken by them to the Public Incinerator. When this involves hardship the district nurses themselves may collect and dispose of the bags in the Incinerator.

Seymour House This is a Geriatric Day Centre run by the City of Cambridge Department of Public Health and Welfare. It is located on the south-east side of the city, on part of a site which belongs to the local authority. The remainder of the site is occupied by old people's bungalows and flatlets. The flatlets are under the supervision of a warden, and are connected to Seymour House by covered walks. On an adjacent site Cambridgeshire County Council has built an old people's residential home for those who need constant care and attention.

The main purpose of Seymour House is to provide facilities for elderly people, particularly those with some physical disability who would otherwise be housebound and have few social contacts. It caters for people in the City and County. Each person attends for one or two days per week. Transport is provided: this consists of an ambulance/bus which has a tail-lift for those who have difficulty in climbing steps. The Centre is open from 9 a.m. until 5 p.m. Mondays to Fridays. Morning coffee, a cooked lunch and afternoon tea are provided for 2/- a day.

Instead of being confined to their houses, those who attend are able to meet and talk with others, and this alone appears to bring about a marked improvement in their outlook and general condition. They play cards, watch television and indulge in other activities. Film shows are sometimes given. There are facilities for baths, showers and hair-washing. On some days there are sessions of occupational therapy and chiropody. It is hoped that physiotherapy will be available later, and also cookery training for elderly men who live alone.

People are recommended for attendance by general practitioners, hospital consultants, health visitors, district nurses and others. Seymour House can cater for up to 40 old people daily, and up to 18 of the inhabitants of the adjacent flatlets attend for lunch only.

The main room is a large hall which can be divided, and part of it is used in the evenings as a club-room for old people living in the flatlets and bungalows nearby. The staff consists of 3 attendants, 1 driver, 1 cook and 3 domestic helpers in addition to the Superintendent and deputy (both of whom are State Registered Nurses).

MENTAL HEALTH

Towards the end of the year the County Council appointed an additional mental welfare officer and allocated him to work full time in the City. This is providing much needed assistance to the senior and two other mental welfare officers employed by the City Council. Whilst the statistics at the end of this part of the report reveal the number of patients actively receiving assistance from these officers, they do not show the many daily calls made upon them for other forms of help. These range from advice to other social work agencies confronted with persons apparently in need of some form of care, to the guiding of persons through the complexities of statutory and voluntary agencies to the one that can be of greatest help. One of the officers devotes a considerable amount of off-duty time giving support to the residents in one of the homes run by the Cambridgeshire Mental Welfare Association; other officers are helping in their off-duty times at the several psychiatric social clubs.

Admission to the County Council's Junior and Adult Training Centres (including transfers from this Council's Diagnostic Unit and the Lady Adrian School) continue to be delayed in some instances due to the shortage of places. This will remain the case for children until the County Council is able to provide an additional Junior Training Centre, but it has their highest priority. The position for Adults will ease a little with the opening in the Spring of an additional workshop at the Adult Centre at Coldham's Lane.

The statistics for the year are as follow:

Mentally Subnormal Persons

Admissions to hospitals for permanent care during 1968:	
Under Section 60 of the Mental Health Act, 1959 ..	1
Informal patients	11
Discharged	—
Died	1
Transferred from Little Plumstead Hospital to the Ida Darwin Hospital	—
Awaiting permanent admission	22
Admissions to hospitals for periods of temporary care ..	12
Temporary care arranged elsewhere and with financial assistance by the Council	10
Attending Junior Training Centre	34
Resident on a weekly basis in the hostel attached to the Junior Training Centre	5
Attending Adult Training Centre	60
Resident in Edmund House	5
Under formal guardianship	4
Receiving home teaching	6
Total number receiving home visits, including those in the above categories but excluding educationally sub-normal school children visited by mental welfare officers ..	184

Mental Illness

Hospital admissions during 1968:	
Under Section 25 of the Mental Health Act, 1959 ..	13
do. 60	1
do. 26	3
do. 29	50
Informal patients	64
Receiving visits by mental welfare officers at 31.12.68 ..	142
Winston House. ¹ Resident at 31.12.68	5
<i>The Hawthorns Hostel.</i> ² Resident at 31.12.68	3

¹ A home for ex-hospital patients.

² A County Council Hostel for maladjusted children.

THE BLIND AND PARTIALLY SIGHTED

The following tables show the work done by the Welfare Officers during the year:

	<i>Male</i>	<i>Female</i>	<i>Total</i>
No. on register at beginning of year ..	99	148	247
Additions to register	11	15	26
Removals from register	20	25	45
No. on register at year end	90	138	228
No. of personal visits	426	407	833
No. of lessons given	217	74	291

The lessons given were:

Braille .. 93	Stoolmaking .. 4	Chair caning .. 43
Moon .. 26	Pulpcane .. 120	Miscellaneous .. 1
Rugmaking.. 4		

In addition to the personal visits recorded in the tables, the Welfare Officers made 227 miscellaneous visits and gave instruction at 47 sessions of the Tuesday Craft Class and 46 sessions at the St Raphael Club Craft Class. The combined number of attendances at these two classes during the year was 744.

Liaison is maintained with the Cambridgeshire Society for the Blind (who run two residential homes and a club in the City) and the Welfare Officers have given some assistance to a group of blind people who have formed a rehabilitation club.

OTHER PHYSICALLY HANDICAPPED

The Welfare Officers also visited persons with physical handicaps other than deficiency of sight, hearing or speech and the following tables show the work done.

	<i>Male</i>	<i>Female</i>	<i>Total</i>
No. on register at beginning of year ..	131	190	321
Additions to register	19	37	56
Removals from register	29	28	57
No. on register at year end	121	199	320
No. of personal visits	289	526	815
No. of lessons given	11	106	117

The lessons given were:

Chair caning .. 8	Stoolmaking .. 7	Lampshades .. 14
Pulpcane .. 47	Card Weaving .. 1	Weaving .. 3
Knitting .. 6	Embroidery .. 16	Miscellaneous .. 6
Toymaking.. 2	Rugmaking.. 7	

One of our Welfare Officers attends, every Wednesday afternoon, at the St Raphael Club for physically handicapped people, to assist with a handicraft class, and a Craft Teacher attended twice weekly at Seymour House Geriatric Day Centre until a full time Occupational Therapist was appointed in October.

CERVICAL CYTOLOGY CLINICS

Monthly clinics were held on the 1st Friday afternoons in the month at Auckland Road Clinic and the 3rd Friday afternoons in the month at Romsey Clinic.

97 patients attended Auckland Road Clinic in 11 sessions.

104 patients attended Romsey Clinic in 11 sessions.

CHIROPODY SERVICE

An arrangement has been made with local Chiropodists in private practice whereby persons in the categories listed below who are recommended by their doctor or by the Public Health Department, may receive treatment at reduced rates. The work carried out is summarised in the following table.

Number of persons treated during 1968

	<i>By Local Authority (1)</i>	<i>By Voluntary Organisations (2)</i>	<i>TOTAL (3)</i>
Male over 65	305	—	305
Female over 60	1,828	—	1,828
Expectant mothers	—	—	—
Children under 5	—	—	—
Handicapped persons	19	—	19
TOTAL	2,152	—	2,152

Number of treatments given during 1968

	<i>By Local Authority (1)</i>	<i>By Voluntary Organisations (2)</i>	<i>TOTAL (3)</i>
In clinics { including Old Peoples Social Centres and Clubs	422	—	422
In patients homes	1,547	—	1,547
In Old Peoples Homes	562	—	562
In Chiropodists surgeries	10,736	—	10,736
TOTAL	13,267	—	13,267

Number of treatments included above which were paid for by the Authority on the basis of <i>fees per treatment.</i>	Local Authority	12,283
	Voluntary Organisations	—
	TOTAL	12,283

Part V

MISCELLANEOUS MATTERS

Health Education Posters were displayed and leaflets distributed, upon health topics, during the year, chiefly at our clinics. About 40 lectures were given by members of the department to various groups and organisations in the city. Demonstrations of infant feeding methods were given at the clinics.

Visitors to the Department As usual a considerable number of people visited the department to see our work or to receive instruction. They came, not only from this country, but from places as distant as Hungary, Ceylon and Mexico.

Ambulance Service An Ambulance Service is provided by Cambridge-shire and Isle of Ely County Council and the vehicles are stationed at depots in Ditton Walk, Cambridge, Ely, Wisbech and March. There are 18 Ambulances, 5 Utilicons and 2 chair carrying vehicles.

Mass Radiography The Mass Radiography Unit of the East Anglian Regional Hospital Board offered facilities for the examination of Cambridge citizens during the year.

Research Work We continued to take part in the National Survey of Health and Development, organised by the Medical Research Council; also in the Survey of Childhood Cancers, organised by the Department of Social Medicine of Oxford University.

We also afforded facilities for research into the interaction of mothers and babies, carried out by the Department of Experimental Psychology of the University.

